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To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

DEPARTMENT OF STATE
TALLAHASSEE FLORIDA

2005 AUG 17 AM 10:19

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FLORIDA PROFIT CORPORATION OR P.A.

GO MEDICAL EQUIPMENT INC.

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8/18/05

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ARTICLES OF INCORPORATION
OF
GO MEDICAL EQUIPMENT INC.

CLERK OF STATE
TALLAHASSEE FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

GO MEDICAL EQUIPMENT INC.

The principal place of business of this corporation shall be:

995 NORTH MIAMI BEACH BLVD #143, NORTH MIAMI BEACH, FL 33165

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is:

100 SHARES @ \$1.00 PV

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is (are):

ANA V. RODRIGUEZ (P)
995 NORTH MIAMI BEACH BLVD #143
NORTH MIAMI BEACH, FL 33165

H05000197456 3

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

ANA V. RODRIGUEZ
995 NORTH MIAMI BEACH BLVD #143
NORTH MIAMI BEACH, FL 33165

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have)
executed these Articles of Incorporation this, 17th day
of AUGUST, 2005.

Signature(s) of Incorporator (s)



ANA V. RODRIGUEZ

H05000197456 3

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TALLAHASSEE FLORIDA
CLERK OF THE COURT

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/ REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation:

GO MEDICAL EQUIPMENT INC.

2. The name and address of the registered agent and office is :

ANA V. RODRIGUEZ 995 NORTH MIAMI BEACH BLVD #143

(P.O. BOX NOT ACCEPTABLE)

NORTH MIAMI BEACH, FL 33165

(CITY/STATE/ZIP)

Signature A. Rodriguez

Title PRESIDENT

Date 08/17/05

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE A. Rodriguez

DATE 08/17/05