# Pabboon 55891

(Re	questor's Name)		
(Address)			
(Address)			
(Cit	y/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	me)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



600070653156

114/18/15--(11024--008 \*\*87.50

TECHTIVE OF STATE A

L'aire

# COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Med-Smart Respiratory Care Inc (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
\$70.00	ginal and one (1) copy of the art	\$78.75	<b>✓</b> \$87.50	
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy  ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED	
FROM:	WAIDE I.	SMART (Printed or typed)	<del></del>	
	660 SW 28	8TH DRIVE		
	<del></del>	Address	· · · · · · · · · · · · · · · · · · ·	
		OALE FL 33313		
	City	, State & Zip		
	954-579-7		· · · · · · · · · · · · · · · · · · ·	
	Daytime 1	relephone number	•	

NOTE: Please provide the original and one copy of the articles.

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

# ARTICLE I NAME

The name of the corporation shall be:

Med-Smart Respiratory Care, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

660 SW 28TH DRIVE FT, LAUDERDAE FL 33312

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FOR PROVIDING RESPIRATORY CARE SERVICES

### ARTICLE IV SHARES

The number of shares of stock is:

100

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

WAIDE I SMART - PRESIDENT 660 SW 28TH DR FT. LAUDERDALE, FL 33312

JENNIFER A SMART - SECRETARY 660 SW 28TH DR FT. LAUDERDALE, FL 33312

#### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

WAIDE I SMART - PRESIDENT 660 SW 28TH DR FT. LAUDERDALE, FL 33312

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

THO MINING WILL WAS DE WAS A STATE OF THE ST	
WAIDE I SMART - PRESIDENT	
660 SW 28TH DR	
FT. LAUDERDALE, FL 33312	
************	****************
Having been named as registered agent to accept service of pro certificate, I am familiar with and accept the appointment as regi	cess for the above stated corporation at the place designated in this istered agent and agree to act in this capacity
(1) (1)	4-12-06
Signature/Registered Agent	Date
1 Dollar	4-12-06
Signature/Incorporator	Date

