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CORPORATE FILING SERVICE 3320 SW 87TH AVENUE MIAMI, FL 33165 305-552-5973

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CORPORATION NAME(S) & DOCUM	MENT NUMBER(S), (if known):	
X-PRESS MEDICA	9L SUPPLY CO.	بي
(Corporation Name)	(Document #)	
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NEW FILINGS	<u>AMENDMENTS</u>	÷
Profit	Amendment	- <u>:</u> :
Not for Profit Limited Liability	Resignation of R.A., Officer/Director Change of Registered Agent	÷
Domestication Other	Dissolution/Withdrawal Merger	.
OTHER FILINGS	REGISTRATION/QUALIFICATION	•
Annual Report	☐ Foreign	
Fictitious Name	Limited Partnership	
·	Reinstatement Trademark	
	Other	
	Examiner's Initials	
CR2E031(7/97)	Additional of Additional	

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

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

ARTICLE I - NAME

The name of the corporation shall be:

X-PRESS Medical Supply Co.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

6521 Pembroke Rd. Hollywood, FL. 33023

ARTICLE III - SHARES

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

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Arelis Hiciano 2460 NW. 155st Miami Gardens, FL 33054

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

Arelis Hiciano 2460, NW. 1555t

Miami Gardens, FL. 33054
The undersigned incorporator has executed these Articles of Incorporation this day of 2005

Signature

ARTICLE VI DIRECTOR(S)

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

Arelis Hiciano, President

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature