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SION OF CORPORATIONS

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COVER LETTER

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

SUBJECT:	XT MEDICAL SUPPLIES CORP			
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	l a check for:	
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:		SUPPLIES CORP		
	8355 NW 74TH STREET STE-E Address			
	MIAMI FL 33166 City, State & Zip			
	305-591-9661 Daytime Telephone number			

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

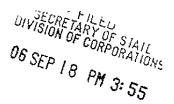
ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

XT MEDICAL SUPPLIES CORP



ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

8355 NW 74TH STREET STE-E MIAMI FL 33166

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MEDICAL SUPPLIES DISTRIBUTION

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES AT VALUE OF 10 DLLS EACH

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

XIOMARA TAPANES - PRESIDENT - 100 % SHAREHOLDER 8355 NW 74TH STREET STE-E MIAMI FL 33166

ARTICLE VI REGISTERED AGENT

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

XIOMARA TAPANES

8355 NE 74TH STREET STE-E MIAMI FL 33166

ARTICLE VII _ INCORPORATOR

The name and address of the Incorporator is:

XIOMARA TAPANES

8355 NW 74TH STREETSTE-E MIAMI FL 33166

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent & Incorporate

Date