

P07000021360

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

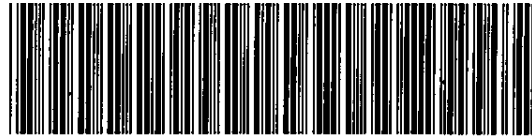
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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07 FEB 15 PM 12:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. WHITE FEB 16 2007

## COVER LETTER

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

SUBJECT: AMEDCO GROUP, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☒ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: Roberto Seade  
Name (Printed or typed)

1901 Brickell Ave. unit 2309  
Address

miami - FL 33129  
City, State & Zip

305 - 793 - 3558.  
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)

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**ARTICLE I NAME**

The name of the corporation shall be:

AMEDCO Group, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

1901 Brickell Ave unit 2309 Miami, FL 33129

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Sell and distribute medical supplies both durable and disposable in US and overseas.

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

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

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

Roberto Saade - President

**ARTICLE VI REGISTERED AGENT**

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

Roberto Saade  
1901 Brickell Ave. unit 2309  
Miami, FL 33129

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Roberto Saade  
1901 Brickell Ave. unit 2309  
Miami, FL 33129

\*\*\*\*\*  
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

X   
\_\_\_\_\_  
Signature/Registered Agent

Feb/13 - 2007  
\_\_\_\_\_  
Date

X   
\_\_\_\_\_  
Signature/Incorporator

Feb/13 - 2007  
\_\_\_\_\_  
Date