

PO8000016059

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

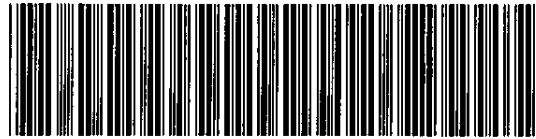
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08 FEB 13 PM 3:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

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

**SUBJECT: Terra Medicus Corp**

**(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: **Ismael Galvez**

Name (Printed or typed)

**12464 Sw 27 St**

Address

**Miami, Fl 33175**

City, State & Zip

**305-300-7736**

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 10, 2007

ISMAEL GALVEZ  
12464 SW 27 ST.  
MIAMI, FL 33175

SUBJECT: TERRA MEDICUS CORP.  
Ref. Number: W07000059746

We have received your document for TERRA MEDICUS CORP. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete Article(s) VI.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole  
Regulatory Specialist II  
New Filing Section

Letter Number: 707A00069319

**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:

Terra Medicus Corp.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

12464 SW 27 Street Miami, FL 33175

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Health courses & Safety Equipment

**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):

Ismael Galvez - ~~President~~ *owner*  
12464 SW 27 Street Miami, FL 33175

**ARTICLE VI REGISTERED AGENT**

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

12464 SW 27 Street Miami, FL 33175  
*ISMAEL GALVEZ  
12464 SW 127 AVE  
MIAMI, FL 33175*


**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

~~Terra Medicus Corp.~~ *ISMAEL GALVEZ*  
12464 SW 27 Street  
Miami, FL 33175

\*\*\*\*\*  
*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

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

*12-4-07*  
\_\_\_\_\_  
Date

*12-4-07*  
\_\_\_\_\_  
Date

FILED  
08 FEB 13 PM 3:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA