## Florida Department of State

**Division of Corporations** Public Access System

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

: TAZARUS CORPORATE ELLING SERVICE, INC. Account Name

Account Number : I20000000019 : (305)552-5973 Phone

Fax Number : (305)220-1440

## FLORIDA PROFIT/NON PROFIT CORPORATION

## E.M.T INTERNATIONAL GROUP, INC

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FROM : LAZARUS

# H0900018262Z

#### 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:

E.M.T International group, Inc

#### **ARTICLE II - PRINCIPAL OFFICE**

THE PRINCIPAL PLACE OF BUSINESS AND MAILING OF THIS CORPORATION SHALL BE:

5345 NW 158th Terrace Ap Miami Lakes, FL 33014

## ARTICLE III - SHARES

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

100

# ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS

Eliana Cuervo 5345 NW 158th Ter Apt 207 Miami Lakes, FL 33014

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#### ARTICLE V - INCORPORATOR

THE NAME AND STREET ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION IS:

Eliana Cueruo 5345 NW 158th Fer Apt 207 Migmi Lakes, FL 23014

THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE ARTICLES
OF INCORPORATION THIS

Solicoron Porpus

RETARY OF STANSEE, FLO

ARTICLE VI - DIRECTOR(S)

THE NAME(S) AND STREET ADDRESS (ES) OF THE DIRECTOR(S) TO THESE ARTICLES OF INCORPORATION IS (ARE):

Eliana Cuervo (P)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED

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

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