

P09000098006

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

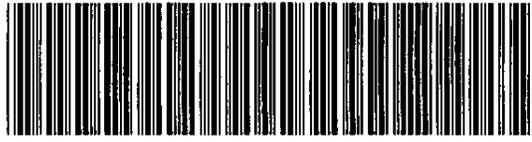
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
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gf 12/4/09

COVER LETTER

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

SUBJECT: Stella's Medical Solutions, 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: Marie Gelin
Name (Printed or typed)

12010 W Golf Drive
Address

Miami, FL 33167
City, State & Zip

305-333-9991
Daytime Telephone number

aadejola@aol.com
E-mail address: (to be used for future annual report notification)

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

ARTICLES OF INCORPORATION

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DIVISION OF CORPORATIONS

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 Stella's Medical Solutions, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address is 12010 W Golf Drive, Miami, FL 33167.

ARTICLE III PURPOSE

The purpose of which the corporation is organized is to provide services in accordance with all applicable statutes in the United States, the state of Florida and its applicable jurisdictions.

ARTICLE IV SHARES

The total number of shares that the corporation is authorized to issue is 100 shares, and all such shares have a par value, and the aggregate par value of all such shares is one hundred (\$100).

ARTICLE V INITIAL OFFICERS AND DIRECTORS

The number of director of the corporation is one and the following name, titles and residence of the person appointed to act as director until successors are elected and qualified:

Name		Residences
Marie Gelin	President	12010 W Golf Drive, Miami, FL 33167
Marie Gelin	Vice President	12010 W Golf Drive, Miami, FL 33167
Marie Gelin	Secretary	12010 W Golf Drive, Miami, FL 33167
Marie Gelin	Treasurer	12010 W Golf Drive, Miami, FL 33167

ARTICLE VI REGISTERED AGENT

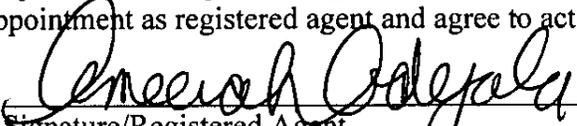
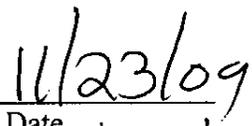
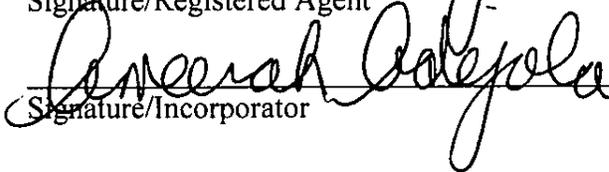
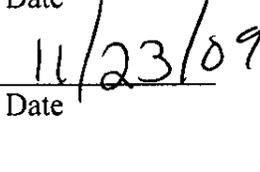
The registered agent for service of process upon the corporation is:

Name	Address in Florida
Ameerah S. Adejola	2081 Coral Ridge Drive, Coral Springs, FL 33071

ARTICLE VII INCORPORATOR

The name and address of the incorporator for this corporation is Ameerah S. Adejola,
2081 Coral Ridge Drive, Coral Springs, FL 33071

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	 Date
 Signature/Incorporator	 Date

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