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COVER LETTER

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

SUBJECT:	MEDICAL GREEN LABORATORY, INC.			
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d 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:	Elkin Melo Name (Printed or typed)			
-	12245 S.W. 128th Street, Unit # 301 Address			
	Miami, FL 33186 City, State & Zip			
	305-552-7642 Daytime Telephone number			
	terevaldi@bellsouth.net			
	E-mail address: (to be use	d for future annual report i	notification)	

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: MEDICAL GREEN LABORATORY, INC ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is: 12245 S.W. 128 STREET, UNIT 301 MIAMI FL 33186 **PURPOSE** ARTICLE III The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS SHARES ARTICLE IV The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): ELKIN MELO, PRESIDENT 12245 S.W. 128 STREET, UNIT 301 MIAMI, FL 33186 ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: ELKIN MELO 122 45 S.W. 128 STREET, UNIT 301 MIAMI, FL 33186 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: 12245 S. W. 128 STREET, UNIT 301 M. AM, FL 33186 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 edpacity

11-30-2009