

P12000040007

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

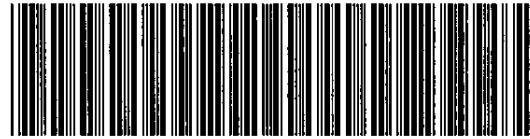
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
12 APR 30 PM 2:14

MAY 1 2012

T. HAMPTON

46106-21

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MEDICAL TECHNOLOGY SERVICES CORP.
Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

RICARDO E. MOLINA
Contact Person

MTS (MEDICAL TECHNOLOGY SERVICES)
Firm/Company

P.O. Box 823256
Address

PEMBROKE PINES, FL 33082
City, State and Zip Code

RICARDO.MOLINA@MTSII.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RICARDO E. MOLINA at (787) 217-6060
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> \$105.00 Filing Fees | <input type="checkbox"/> \$113.75 Filing Fees
and Certificate of
Status | <input type="checkbox"/> \$113.75 Filing Fees
and Certified Copy | <input checked="" type="checkbox"/> \$122.50 Filing Fees,
Certified Copy, and
Certificate of Status |
|---|---|---|---|

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

12 APR 30 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 13, 2012

RICARDO E MOLINA
MEDICAL TECHNOLOGY SERVICES
P O BOX 823256
PEMBROKE PINES, FL 33082

SUBJECT: MEDICAL TECHNOLOGY SERVICES CORP
Ref. Number: W12000020736

We have received your document for MEDICAL TECHNOLOGY SERVICES CORP and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

In Article VI list the name of the registered agent.

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) 245-6051.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 812A00011736

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Profit Corporation

This Certificate of Conversion **and attached Articles of Incorporation** are submitted to convert the following **"Other Business Entity"** into a **Florida Profit Corporation** in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

MEDICAL TECHNOLOGY SERVICES, LLC.

Enter Name of Other Business Entity

2. The "Other Business Entity" is a Limited Liability Company
(Enter entity type. Example: limited liability company, limited partnership,
general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of USA
(Enter state, or if a non-U.S. entity, the name of the country)

on 3/01/2011
Enter date "Other Business Entity" was first organized, formed or incorporated

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3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation**:

MEDICAL TECHNOLOGY SERVICES Corp..

Enter Name of Florida Profit Corporation

★ 5. If not effective on the date of filing, enter the effective date: _____
(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; **AND** 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

6. The conversion is permitted by the applicable law(s) governing the other business entity and the conversion complies with such law(s) and the requirements of s.607.1115, F.S., in effecting the conversion.

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is currently organized, formed or incorporated.

Signed this 9 day of April, 2012.

Required Signature for Florida Profit Corporation:

Individual signing affirms that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: _____

Printed Name: RICARDO E. MOLINA Title: PRESIDENT

Required Signature(s) on behalf of Other Business Entity: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).]

* Signature: _____
Printed Name: RICARDO E. MOLINA Title: PRESIDENT

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

* **If Florida Limited Liability Company:**

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

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 TECHNOLOGY SERVICES CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address

2033 NW 141st Avenue
Pembroke Pines, FL 33028

Mailing address, if different is:

PO Box 823256
Pembroke Pines, FL 33082

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE EQUIPMENT SALES & SERVICES FOR HEALTHCARE & OTHER INDUSTRIES.

ARTICLE IV SHARES

The number of shares of stock is: 1,000 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: RICARDO E. MOLINA (President)

Address: 2033 NW 141st Ave.
Pembroke Pines, FL 33028

Name and Title: _____

Address: _____

Name and Title: RICARDO J. VELAZ ORTIZ (VP)

Address: 547 MANRID
YAUCO, PR 00698

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: 2033 NW 141st Ave.
Address: Pembroke Pines, FL 33028
RICARDO E. MOLINA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: RICARDO E. MOLINA
Address: PO Box 823256
Pembroke Pines, FL 33082

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

Required Signature/Registered Agent

4/9/2012
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

4/9/2012
Date

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