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Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
NIKSUR MEDICAL SUPPLIES, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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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:

NIKSUR MEDICAL SUPPLIES, INC.

ARTICLE II – PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

**10931 SW 139 Ave
Miami, FL 33186**

ARTICLE III – SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

FIVE HUNDRED (500) SHARES OF ONE DOLLAR (\$1.00) PAR VALUE COMMON STOCK.

ARTICLE IV – INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Nereida Rife
10931 SW 139 Ave
Miami, FL. 33186**

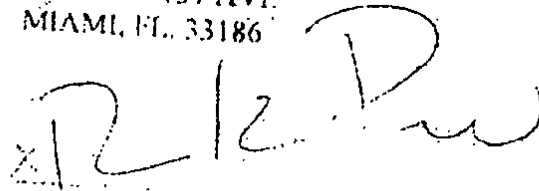
2022-01-05 16:18:45

ARTICLE V - INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

Ruskin Passaro

10931 SW 139 AVE
MIAMI, FL 33186


Signature**ARTICLE VI - DIRECTOR(S)**

The name(s) and street address(es) of these director(s) to these Articles of Incorporation is (are):

(President) Ruskin Passaro 10931 SW 139 Ave Miami, FL 33186

(Vice President) Ruskin Passaro 10931 SW 139 Ave Miami, FL 33186

(Secretary) Ruskin Passaro 10931 SW 139 Ave Miami, FL 33186

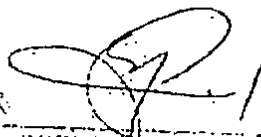
(Treasurer) Ruskin Passaro 10931 SW 139 Ave Miami, FL 33186

(Director) Ruskin Passaro 10931 SW 139 Ave Miami, FL 33186

2022-01-05 16:11:49

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT-REGISTERED OFFICE

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 the statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my positions as Registered Agent.



REGISTERED AGENT
Nereida Rife

DATE: 01/05/2022