

Aug. 15, 2022 1:30PM

GEALD WEINBERG

Division of Corporations

No. 3635 P. 1/3

P22000063704
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : GERALD WEINBERG, P.C.
Account Number : I20030000043
Phone : (800)342-9856
Fax Number : (800)354-3381

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
MEDPACK GROUP INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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(GEALD WEINBERG 275125 3) No. 3695 P. 2/3

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: MEDPACK GROUP INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

545 CHANNELSIDE DRIVE

APARTMENT A709

TAMPA, FL 33602

Mailing address, if different is:

545 CHANNELSIDE DRIVE

APARTMENT A709

TAMPA, FL 33602

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: VINCENTE CABALLER AGOST, P

Address: 545 CHANNELSIDE DRIVE

APARTMENT A709

TAMPA, FL 33602

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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GEALD WEINBERG

(11-22000275125 3) No. 3635 P. 3/3

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: VINCENTE CABALLER AGOST

Address: 545 CHANNELSIDE DRIVE, APT., A709

TAMPA, FL 33602

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: LAWRENCE A. KIRSCH

Address: 41 STATE STREET, SUITE 700

ALBANY, NEW YORK 12207

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

/s/ Vincente Caballer Agost
Required Signature/Registered Agent

08/15/2022

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

Lawrence A. Kirsch
Required Signature/Incorporator

08/15/2022

Date

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