Division of Corporations



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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : RCA ACCOUNTING SERVICES CORP

Account Number : I20180000102 Phone : (305)799-7633 Fax Number : (786)783-3650

\*\*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 RAYMED, CORP.

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

## **AFFIDAVIT**

BEFORE ME, the undersigned authority, on this day personally appeared ADRIANA PAVLUK who after being firstly duly sworn, under oath, deposes and says:

- 1. The undersigned is also the sole Director and the President of RAYMED, CORP., a Florida corporation to be filed with the Florida Department of State on or about 09/25/2009.
- 2. The undersigned hereby consents to and authorizes the use by RAYMED, CORP. of the name RAYMED, CORP.
- 3. The undersigned has personal knowledge of the fact and matter set forth herein and therefore has no intentions of reinstating the dissolved entity.

FURTHER AFFIANT SAYETH NAUGHT.

STATE OF FLORIDA ) ADRIANA PAVLUK

OUNTY OF MIAMI-DADE )

OUNTY OF MIAMI-DADE )

PERSONALLY appeared before me, ADRIANA PAVLUK, who is personally known to me, who being by my first duly sworn, acknowledges that he signed the foregoing for the purposes therein expressed.

Witness my hand and official seal this 19th day of December 2022.

Notary Public Signature

DAIANA AMADOR
State of Florida - Notary Public
Commission # HH 37154
My Commission Expires Aug. 27, 2024

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

RTICLE II PRINCIPAL OF Principal	<u>FFICE</u> <u>street</u> address	Mailing	address, if different is:	
180 NW 36TH STREET	SUITE 406	8180	NW 36TH STREET SUITE	406
		MIAM	II, FL 33166	
RTICLE III PURPOSE	ration is organized is: ANY AND A	.LL LAWFUL BU	ISINESS	
	anon is organization of the state of the sta			
ARTICLE IV SHARES The number of shares of stock is	:_100			
The number of shares of stock is	: 100 FICERS AND/OR DIRECTORS			
The number of shares of stock is  ARTICLE V INITIAL OFF				
The number of shares of stock is  ARTICLE V INITIAL OFF  Name and Title: AQRL	FICERS AND/OR DIRECTORS	Name and Title:		
The number of shares of stock is  ARTICLE V INITIAL OFF  Name and Title: AQRI  Address 8180 NV	ANA PAVLUK (P)	Name and Title:		
The number of shares of stock is  ARTICLE V INITIAL OFF  Name and Title: AQRI  Address 8180 NV	TICERS AND/OR DIRECTORS  ANA PAVLUK (P)  V 36TH STREETSUITE 406	Name and Title:		
The number of shares of stock is  ARTICLE V INITIAL OFF  Name and Title: AQRL  Address 8180 NV	ANA PAVLUK (P) V 36TH STREETSUITE 406 VII, FL 33166	Name and Title: Address:	2#22 D	
The number of shares of stock is  ARTICLE V INITIAL OFF  Name and Title: AQRI  Address 8180 NV  MIAI	TICERS AND/OR DIRECTORS  ANA PAVLUK (P)  V 36TH STREETSUITE 406	Name and Title:	2#22 D	

Name and Title:	Name and Title:			
Address	Address:			
		<del></del> -		
Name and Title:	Name and Title:			
Address	Address:			_
	-		_	
			-	
<u>ARTICLE VI REGISTERED AGENT</u> The <u>name and Florida street address</u> (P.O. Box NOT accep	otable) of the registered agent is:			
Name: ADRIANA PAVLUK				
Address: 8180 NW 36TH STREET SUITE 406				
MIAMI, FL 33166			2322	
			ټ	
ARTICLE VII INCORPORATOR		• •	20	
The name and address of the Incorporator is:		·"	<b>P</b>	i
Name: ADRIANA PAVLUK		1.051	3H I2: 03	Ĺ.
Address: 8180 NW 36TH STREET SUITE 40	6	 	03	
MIAMI, FL 33166				
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: 01/01/202	3 (OPTIONAL)			
(If an effective date is listed, the date must be specific and	l cannot be more than five days prior or	r 90 days afti	er the fil	ling.)

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

10/ adriana Pavluk 12/19/2022

Recuired Signature/Registered Agent 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.

10/ adiciona Parlick

12/19/2022

Date

2022 DEC 20 PK 12: 03