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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973

Fax Number : (305)675-5944

**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 **OMS MED 120 CORP**

Certificate of Status	0
Certified Copy	1
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Corporate Filing Menu

2/20/24

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit) E/N: 99 - 14/19/5

SMed 120 CORP	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
Minui FL 37186	
TCLE III SHARES: The number of shares of stock is:	<u> </u>
ARTICLE IV INITIAL DIRECTORS AND/OR OFFI	
ORLANDO MESA GOUZALEZ 1	(P)
DOWNER DE LE DEFENDE LA CESTE AND SEDERE	t annucce.
rane and Florida street address (PO Boy not acceptable) of the re-	LALUUKESS: oistered scent is
name and Florida street address (PO Box not acceptable) of the re	ECI
12150 SW 128CT #142	<u></u>
Misni ET 33186	
	Ir cornorator is
ETICLE VI INCORPORATOR: The name and address of the	TE (OTPOTATO)
COLLUD MCORPORATOR: The name and address of the	TI (OI POI GEO)

Required Signatures:

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

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.

incorporator

2-19-24 Date

SECRETARY IT SIME