

**P95000041578**

TO: DIVISION OF CORPORATIONS  
DEPARTMENT OF STATE  
STATE OF FLORIDA  
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DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.  
NAME: NATIONAL ASSOCIATION OF MEDICAL TECHNICIANS, INC.  
FAX AUDIT NUMBER: H95000006900  
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MORRIS PEARL, ESQ.  
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**ARTICLES OF INCORPORATION  
OF  
NATIONAL ASSOCIATION OF MEDICAL TECHNICIANS, INC.**

**I  
CORPORATE NAME**

The name of this corporation shall be NATIONAL ASSOCIATION OF  
MEDICAL TECHNICIANS, INC.

**II  
PRINCIPAL OFFICE**

The principal place of business address of this corporation is 1750 N.W. 27th  
Avenue, Suite 505, Miami, Florida 33125.

**III  
CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have  
outstanding at any one time is one thousand (1000) shares of common stock at no per  
share par value.

**IV  
PURPOSES**

The general nature and purposes of business to be transacted, promoted and  
carried on by the corporation are as follows:

- a. To engage in the training, instruction and education of students in diverse  
fields of medical technology including but not limited to phlebotomy technicians, and  
to that effect establish and operate a school.
- b. To engage in any commercial, mercantile, manufacturing, industrial or trading

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business of any kind and to do all things incidental to any such business; to manufacture, purchase or otherwise acquire, lease, pledge, mortgage, sell or otherwise dispose of, and to trade in and deal in any and every kind of commodity, merchandise, machinery, equipment, material and product.

c. To acquire by purchase, lease or otherwise, any property or any interest therein, whether tangible or intangible.

e. To acquire by purchase, lease or otherwise, and to build, construct or erect, plants, buildings, structures, works and improvements on any kind.

f. To enter into any partnership, limited partnership or joint venture organized under the laws of the State of Florida.

V

**INITIAL REGISTERED AGENT AND OFFICE**

The address of this corporation's initial registered office is located at 1750 N.W. 27th Avenue, Suite 505, Miami, Florida 33125 and the name of its initial registered agent at said address is ERNESTO C. RIVERO.

VI

**INCORPORATORS**

The name and street address of the incorporator to these articles of incorporation is ERNESTO C. RIVERO, 1750 N.W. 27th Avenue, Suite 505, Miami, Florida, 33125.



ERNESTO C. RIVERO  
Incorporator

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STATE OF FLORIDA  
COUNTY OF DADE

BEFORE ME, the undersigned authority, personally appeared ERNESTO C. RIVERO, who is personally known to me, who did take an oath, and who is to me well known to be the person described in and who executed the foregoing Articles of Incorporation as the Incorporator, and he acknowledged to and before me that he executed the same for the uses and purposes therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and seal at Miami, in the said County and State, this 26<sup>th</sup> day of May, 1995.

  
NOTARY PUBLIC, State of Florida

My Commission Expires:



MORAIMA FEAL  
My Comm. Exp. 6/07/98  
Bonded By Service Inc  
No. CC379993  
My Comm. Term 11/00/95

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**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR  
THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON  
WHOM PROCESS MAY BE SERVED.**

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted in  
compliance with said Act:

That **NATIONAL ASSOCIATION OF MEDICAL TECHNICIANS, INC.**  
desiring to organize under the laws of the State of Florida with its principal office as  
indicated in the Articles of Incorporation in Miami, Dade County, State of Florida, has  
named **ERNESTO C. RIVERO**, located at 1750 N.W. 27th Avenue, Suite 505, Miami,  
Florida 33125, County of Dade, State of Florida, as its agent to accept services of  
process within the State.

**ACKNOWLEDGEMENT:**

Having been named to accept service of process for the above stated corporation,  
at place designated in this Certificate, I hereby accept to act in this capacity, and agree to  
comply with the provision of said Act relative to keeping open said office.

By: 

**ERNESTO C. RIVERO**  
Registered Agent

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