

P95000071704

TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

000001585380  
-09/15/95--01004--005  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: DECOMED, INC.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

<input type="checkbox"/> \$70.00 Filing Fee	<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certificate	<input type="checkbox"/> \$122.50 Filing Fee & Certified Copy	<input type="checkbox"/> \$131.25 Filing Fee, Certified Copy & Certificate
Additional Copy Required			

FROM: DECOMED, INC.  
Name (printed or typed)

3011 SALZEDO STREET  
Address

Leina GAVE CORAL GABLES, FL 33134  
City, State & Zip

AUTHORIZATION BY PHONE TO  
CORRECT RA address (305) 444 3205  
DATE 9/18/95 Daytime Telephone number

DOC. EXAM. BR

FILED  
95 SEP 14 AM 9:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. REGISTER SEP 18 1995

NOTE: Please provide the original and one copy of the articles.

FILED

95 SEP 14 AM 9:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

*DECOMED, INC.*

ARTICLE II PRINCIPAL OFFICE

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

*3011 SALZEDO STREET  
CORAL GABLES, FL 33134*

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)*

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

*JUAN C. ARMAS  
3011 SALZEDO STREET  
CORAL GABLES, FL 33134*

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors


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

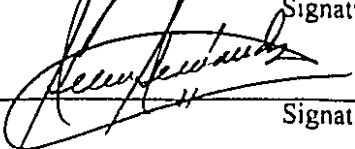
- JUAN C. ARMAS (PRESIDENT)  
3011 SALZEDO STREET  
CORAL GABLES, FL 33134

- HELEN M. HERNANDEZ (VICE-PRESIDENT)  
3011 SALZEDO STREET  
CORAL GABLES, FL 33134

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

28<sup>th</sup> day of AUGUST, 19 95

  
\_\_\_\_\_  
Signature

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:           DECOMED, INC.          

2. The name and address of the registered agent and office is:


          JUAN C. ARMAS            
(NAME)

          3011 SALZEDO ST            
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

          CORAL GABLES, FL 33134            
(CITY/STATE/ZIP)

FILED  
98 SEP 14 AM 9:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Having been named as registered agent and to accept service of process for the above stated corporation at the 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 statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

                      
(SIGNATURE)

          8/28/95            
(DATE)