

P96000004317

TRANSMITTAL LETTER

FILED

96 JAN -4 PM 4:15

TALLAHASSEE, FLORIDA

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

SUBJECT: GEMS CORPORATION
(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 type="checkbox"/> \$78.75 Filing Fee & Certificate	<input type="checkbox"/> \$122.50 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$131.25 Filing Fee, Certified Copy & Certificate
Additional Copy Required			

FROM: ELBA M. TOLEDO
Name (printed or typed)

488 E 42nd Street
Address

Hialeah, Florida 33010
City, State & Zip

(305) 863-0555
Daytime Telephone number

W95-24872

Elba Toledo GAVE **502**

AUTHORIZATION BY PHONE TO
CORRECT Corp. Name + Shares **691**

DATE 1-12-96

DOC. EXAM 524

524 signature '96

Please send
correspondence
to: c/o Elba M. Toledo
8346 NW S. River
Drive #J
Miami, FL 33166
Thank you

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

1-12-96
KH



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

December 26, 1995

ELBA M. TOLEDO
488 E. 42ND STREET
HIALEAH, FL 33010

SUBJECT: GEMS CORPORATION
Ref. Number: W95000024872

We have received your document for GEMS CORPORATION and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

The document must state the number of shares of authorized stock.

You are indicating you executed these articles January 2, 1996. The date of execution is the date you signed the articles. January 2, 1996 is not acceptable. You must list the date you actually signed the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6927.

Kathy Hyman
Document Specialist

Letter Number: 795A00055228

ARTICLES OF INCORPORATION

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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:

GEMS MEDICAL EQUIPMENT, Inc.

ARTICLE II PRINCIPAL OFFICE

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

8346 NW S.River Drive #J
Miami, Fl. 33166

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Elba M. Toledo
488 E 42nd Street
Hialeah, Fl. 33010

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):

Elba M. Toledo
488 E 42nd St
Hialeah, FL 33010

*Elba M. Toledo has 100% of profit shares owned.

EFFECTIVE 1-02-96

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

14

December

95

02 day of January, 19 96.

Elba M Toledo.

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: _____ GLMS MEDICAL EQUIPMENT, Inc.

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

ELBA M TOLEDO
(NAME)

488 E 42nd STREET
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

HIALEAH, FLORIDA 33010
(CITY/STATE/ZIP)

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.

Elba M Toledo
(SIGNATURE)

12/14/95
(DATE)