

Miami November 13,1995

Secretary Of State Division Of Corporations P.O. Box 6327 Tallahassee,Florida 32314 **800001657998**-12/08/95--01083--008
****122.50 ****122.50

996A - 311

Ref: Blason Medical Corporation

Gentlemen:

Enclosed Please find the original copy of Articles of Incorporation, together with the check in the amount of \$ 122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above Corporation.

Yerf Truly Yours

Em¶qua Barrios

6404 NW 199th Terrace Hialeah, Florida 33015

Phone # 305-597-9067



December 11, 1995

ENRIQUE BARRIOS 6404 NW 199TH TERRACE HIALEAH, FL 33015

SUBJECT: BLASON MEDICAL CORPORATION

Ref. Number: W95000024140

We have received your document for BLASON MEDICAL CORPORATION and check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent and registered office listed in your articles of incorporation must be consistent throughout 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) 487-6878.

Terri Buckley Corporate Specialist

Letter Number: 195A00053592

ARTICLES OF INCORPORATION

of

	HLASON MEDICAL C (name of corporation)	ORPORATION
The undersigned subscriber(s) to the corporation under the laws of the	se Articles of Incorporation, natural per	rson(s) competent to contract, hereby form a
	ARTICLE I - CORPORATE NA	ME FE
The name of the corporation is:	BLASON MEDICAL CORPOR	RATION
	ARTICLE II - DURATION	13 6 63 C
This corporation shall exist perpetu	ally unless dissolved according to Flo	orida law.
	ARTICLE III - PURPOSE	S. C.
The corporation is organized for the United States and the State of Flor	purpose of engaging in any activities rida.	or business permitted under the laws of the
	ARTICLE IV - CAPITAL STOC	:K
The corporation is authorized to issu		(500) of <u>ONE</u>
Dollar(s) (\$ 1.00	par value Common Stock, which sh	all be designated "Common Shares."
	V - INITIAL REGISTERED OFFIC	
		he Initial Registered Agent at that office is:
NAME ENRIQUE BERRIOS		
ADDRESS 6404 NW 199th TE	RRACE- > >() ()	102 na Acie
CITY HIALEAH MINM	,	
	ne mailing adress of the corporation	
NAME Enrique Berrios		***************************************
S TOP IN LIPSON TE		
	FLORID.	
This corporation shall have ONE	o time by the By-Laws, but shall nev	RECTORS lly. The number of directors may be either the directors than one (1). The names and
NAME ENRIQUE BERRIOS		
ADDRESS 6404 NW 199th Ter	rrace	
my Hialeah	STATE	Florida zm 33015
NAME		
ADDRESS		
тү	STATE	ZIP
IAME		
ADDRESS		
пү	STATE	ZIP
ORM 215: ARTICLES OF INCORPORATION	ON, PAGE 1 PAGE 1	SEMINOLE-MIAMI 012593

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of incorporation are as follows:

NAME E	NRIQUE BERRIOS		
ADDRESS	6404 NW 199th Torrace		
CHY	Hialoah	state Florida	ZIP 33015
NAME			
ADDRESS			
CTIY		SIATE	21P
NAMB			
ADDRESS			
CITY		SIATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this	21
day of Non- 1995.	
	(Scal)
	(Scal)
	(Scal)

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

Blason Medical Corporation

(name of corporation)

Pursuent to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 2200 NW 102nd Avenue

Miami, Florida 33172

has named Enrique Berrios

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Liwin keeping open said office.

(registered agent)