P9600012462

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

SUBJECT: Advise-Med, Inc.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:  $\_\_$  70.00

XX \$78.75

\$122.50

\$131.25

From:

Robert DeMaio

436 Monte Cristo Blvd.

Terre Verde, Florida 33715

(813)866-2337

400001707154 -02/06/96--01026--016 \*\*\*\*\*78.75 \*\*\*\*\*78.75

19/96

#### 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 Article of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

Advise-Med, Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

Principal place:

436 Monte Cristo Blvd.

Terra Verde, Florida 33715

Mailing Address:

436 Monte Cristo Blvd.

Terre Verde, Florida 33715

#### ARTICLE III SHARES

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

5,000

### ARTICLE IV INCORPORATOR(S)

The name and street address of the incorporator to these Articles of Incorporation is:

Robert DoMaio 436 Monto Cristo Blvd. Terra Verde, Florida 33715

## ARTICLE V OFFICERS OF THE INCORPORATION

President: Robert DeMaio Vice President: Martha DeMaio

Signature

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWES 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: Advise-Med, Inc.
- 2. The name and address of the registered agent and office is:

Robert DeMaio 436 Monte Cristo Blvd. Terre Cerde, Florida 33715 (813)866-2337

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

Date