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1149 S.W. 27 AVENUE, SUITE

MIAMI FL 33135- 9-0000
CONTACT: ROLANDO TRUJILLO
PHONE: (305) 541-0790
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DOCUMENT TYPE: FLORIDA PROFIT CORPORATION

((H96000005214)))
OR F.A.

NAME: OXIFAX, INC.
FAX AUDIT NUMBER: H96000005214
DATE REQUESTED: 04/12/1996
CERTIFIED COPIES: 0
NUMBER OF PAGES: 3
ESTIMATED CHARGE: \$78.75

CURRENT STATUS: REQUESTED
TIME REQUESTED: 12:47:05
CERTIFICATE OF STATUS: 1
METHOD OF DELIVERY: FAX
ACCOUNT NUMBER:

071324000655

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TALLAHASSEE, FL 32307

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4/12

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ARTICLES OF INCORPORATION
OF

OXIFAX, INC.

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: OXIFAX, INC.

ARTICLE II PRINCIPAL OFFICE

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

1149 S.W. 27 Avenue, Suite 303-A
Miami, FL 33135

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 Shares of Common Stock, \$1.00 Par Value.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Orlando Avellaneda
1149 S.W. 27 Avenue, Suite 303-A
Miami, FL 33135

Prepared by: Orlando Avellaneda
1149 S.W. 27 Ave. #303-A
Miami, FL 33135

Tel: (305) 541-8310 H96.000005214

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ARTICLE V INCORPORATOR(S)

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

Orlando Avellaneda, PRESIDENT
1149 S.W. 27 Avenue, Suite 303-A
Miami, FL 33135

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

9 day of April, 19 96.

+ Orlando Avellaneda

Signature PRESIDENT

Signature

Signature

H96000005214

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**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 LAWS
OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGN-
NATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF
FLORIDA.

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

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

Orlando Avellaneda
(Name)

1149 S.W. 27 Avenue, Suite 303-A
(P.O. Box not acceptable)

Miami, FL 33135

(City/State/Zip)

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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 perfor-
mance of my duties, and I am familiar with and accept the obligations of my position
as registered agent.

Orlando Avellaneda
(Signature)

REGISTERED AGENT

APR 12 1996

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL

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