Requestor's Name

890 S.W. 87 AVENUE SUITE: 16 Address

MIAMI, FLORIDA 33174 (305)552-5973 City/State/Zip

Other

LOCAL REPRESENTATIVE TALLAHASSEE

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. <u>M</u> ,	A, T, ME Corporation Namo)	DICAL ED	vipman	IT INC.
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NonProfit	Resignation	of R.A., Officer/ Director		
Limited Liability	Change of R	legistered Agent		
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80 MAY 2 9 1976 Examiner's Initials

ARTICLES OF INCORPORATION

OF

TALLAHÁSSEL FLORIDA

53 MAY 39 MARIE 18

M.A.T. MEDICAL EQUIPMENT INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the laws of the State of Florida.

ARTICLE I

The name of this corporation shall be:

M.A.T. MEDICAL EQUIPMENT INC.

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE 111

The general nature of the business and objects and purposes proposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- (1) / Transact any and all lawful business.
- (2) Said corporation shall further have powers:

 To have perpetual succession by its corporate name:

ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 100 shares, having an individual par value of \$1.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

Celestino Fernandez

1024 N.W. 128 Place

Miami, F1 33182

The Principal office shall be:

1024 N.W. 128 Place

Miami, F1 33182

ARTICLE VI

The initial Board of Directors shall consist of a total of one (1) person, and the name and address of the person who is to serve as an initial director is:

Celestino Fernandez

1024 N.W. 128 Place

Miami, F1 33182

President

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

Celestino Fernandez

1024 N.W. 128 Place

Miami, F1 33182

The name of the corporation is: M.A.T. MEDICAL EQUIPMENT INC. The name and address of the registered agent and office is: Celestino Fernandez (NAME) 1024 N.W. 128 Place (P.O. BOX NOT ACCEPTABLE) Miami, F1 33182	_		es of Incorporation t	his 28	da
The name and address of the registered agent and office is: Celestino Fernandez (NAME) 1024 N.W. 128 Place (P.O. BOX NOT ACCEPTABLE)	OXMay	<u>/</u>	, 19_06		
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(NAME) 1024 N.W. 128 Place (P.O. BOX NOT ACCEPTABLE) (P.O. BOX NOT ACCEPTABLE)				NT INC.	
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(P.O. BOX NOT ACCEPTABLE)		address of the registe	red agent and office is:	TALLAIN	62 1111 56
		address of the registe Cele (NAME)	red agent and office is: stino Fernandez N.W. 128 Place	TALLAIN	25 1117 29 811
		address of the registe Cele (NAME)	red agent and office is: stino Fernandez N.W. 128 Place	TALLAIN	95 1137 29 611 18

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	(Fen	melez
DATE .	5-28 - 96	1