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TRANSMITTAL LETTER

FILED

96 JUN 20 11 15 AM

STATE OF FLORIDA

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

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005/20/96--01003--D21
***131.25 ***131.25

SUBJECT: GMP ORTHOPEDIC SUPPLIES, INC.
(Proposed corporate name - must include suffix)

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

- \$70.00 Filing Fee
 - \$78.75 Filing Fee & Certificate
 - \$122.50 Filing Fee & Certified Copy
 - \$131.25 Filing Fee, Certified Copy & Certificate
- Additional Copy Required**

FROM: GMP ORTHOPEDIC SUPPLIES, INC./ Mariela Villate
Name (printed or typed)

4050 N.W. 135TH ST. BUILDING 10 APT.2
Address

MIAMI, FLORIDA. 33054
City, State & Zip

(305) 681-3267
Daytime Telephone number

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

Handwritten: 6-21-96

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 Articles of Incorporation.

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FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

GMP ORTHOPEDIC SUPPLIES, INC.

ARTICLE II PRINCIPAL OFFICE

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

4050 N.W. 135TH STREET BUILDING 10 MIAMI, FLORIDA. 33054

ARTICLE III SHARES

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

(500) WITH (\$1.00) DOLLARS PER VALUE PER SHARE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GREGORIO PAUT
4050 N.W. 135TH ST. BUILDING 10 APT. 2
MIAMI, FLORIDA. 33054

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):

MARIELA VILLATE (PRESIDENT) 4050 N.W. 135TH ST BUILDING 10 #2
MIAMI, FLORIDA. 33054

GREGORIO PAUT (REGISTERED AGENT)
4050 N.W. 135TH ST. BUILDING 10 #2
MIAMI, FLORIDA. 33054

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

14 day of JUNE, 19 96.

(An additional article must be added if an effective date is requested.)



Signature



Signature

Signature

Notarization is not required

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: GMP ORTHOPEDIC SUPPLIES, INC.

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

GREGORIO PAUT

(NAME)

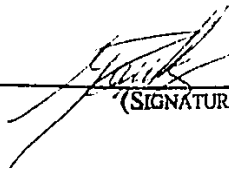
4050 N.W. 135TH STREET BUILDING 10 APT. 2

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

MIAMI, FLORIDA. 33054

(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.

X 
(SIGNATURE)

6/10/06
(DATE)