# P9600084915

96 OCT 14 AM11: 33

SECRETARY OF STATE September 11, 1545 AHASSEE FLORIDA

Department of State Division of Corporation P. O. Box 6327 Tallahassee, Florida 32314

400001958974 -09/27/96--01040--005 \*\*\*\*122.50 \*\*\*\*122.50

Dear Sir:

Enclosed is the original and one copy of the Articles of Incorporation of Penta Med, Inc.

Also enclosed is a check in the amount of \$122.50 to cover charter tax, filing fee, certified copy and resident agent's fee.

Thank you for your attention to this matter.

Sincerely,

29575 130/30/96 1130/36/p



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

September 30, 1996

ANTHONY R. GRAHAM 679 DESTACADA CIRCLE CORAL GABLES, FL 33156-8002

SUBJECT: PENTA MED, INC. Ref. Number: W96000020575

We have received your document for PENTA MED, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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) 487-6915.

Pamela Hall Document Specialist

Letter Number: 896A00044689

September 11, 1996

Department of State Division of Corporation P. O. Box 6327 Tallahassee, Florida 32314

Dear Sir:

Enclosed is the original and one copy of the Articles of Incorporation of Penta Med, Inc.

Also enclosed is a check in the amount of \$122.50 to cover charter tax, filing fee, certified copy and resident agent's fee.

Thank you for your attention to this matter.

Sincerely.

## CERTIFICATE OF INCORPORATION

AND

FILED

ARTICLES OF INCORPORATION

96 OCT 14 AM 11:33

OF

SECRETARY OF STATE TALLAHASSEE, FLORIDA

PENTA MED, INC.

We, the undersigned, hereby associate ourselves for the purpose of bacoming a corporation under the laws of the State of Florida, by and under the provision of the statutes of the State providing for the formation, liability, rights, privileges and immunities of a corporation for profit.

#### ARTICLE I

The name of this corporation is, Penta Med, Inc., hereinafter referred to as the Corporation.

#### ARTICLE II

# NATURE OF BUSINESS

The general nature of the business and object and purposes proposed to be transacted, promoted or carried on are to engage in any activity of business permitted under the laws of the United States and of this State.

#### ARTICLE III

### CAPITAL STOCK

The amount of the total authorized capital stock of the Corporation shall be Five Hundred (500) shares of common stock of One Dollar (\$1.00) par value.

The whole or any part of the capital stock of the Corporation shall be payable in lawful money of the United States of America, or property, labor or services at a just valuation to be fixed by the Shareholders.

#### ARTICLE IV

# AMOUNT OF CAPITAL WITH WHICH TO BEGIN BUSINESS

The amount of capital with which the Corporation shall begin business shall be not less than Five Hundred (\$500.00) Dollars.

## ARTICLE V

# CORPORATE EXISTENCE

The Corporation shall have perpetual existence.

# ARTICLE VI

The initial street address of said Corporation is 679 Destacada Circle, Coral Gables, Florida 33156-8002, with the privilege, however, of having branch offices or places of business at any other place or places within or without the State of Florida, or in foreign countries.

#### ARTICLE VII

# NUMBER OF DIRECTORS

There shall be no directors. The Corporation shall be managed by the stockholders.

#### ARTICLE VIII

The name and post office addresses of each subscriber to this Certificate of Incorporation and statement of the number of shares of stock which they agree to take are as follows:

Anthony R. Graham 679 Destacada Circle Coral Gables, FL 33156-8002

500 Shares

## ARTICLE IX

#### **OFFICERS**

The officers of this Corporation shall be a President and Secretary.

All officers or agents, as may be deemed necessary by the Shareholders shall be chosen in the manner and hold office for the term prescribed in the By-Laws or determined by the Shareholders.

#### ARTICLE X

This Corporation reserves the right to amend, alter, change or repeal any provision contained in this Certificate of Incorporation in the manner now or hereafter prescribed by law and all rights conferred on stockholders herein are granted subject to this reservation.

IN WITNESS WHEREOF, We (I), the undersigned incorporator(s), have hereunto set our (my) hands and seals this 11th day of September, 1996 for the purpose of forming this Corporation for profit under the laws of the State of Florida, and we hereby make and file in the Office of the Secretary of State of Florida, this Certificate of Incorporation and certify that the facts herein stated are true.

STATE OF FLORIDA) ss:

COUNTY OF DADE)

BEFORE ME, this day personally appeared, Anthony R. Graham to me well known to be the individual described in and who executed the foregoing Certificate of Incorporation and acknowledged that they he executed the same for the purposes therein expressed.

WITNESS my hand and official seal at 8205 S. W. 124 Street, Miami, FL 33156 this 11th day of September, 1996.

Nøvary Public

State of Florida at Large

My Commission Expires:

Rety. 1 Leah Pfelffer
Notary Pull State of Fixeda
My Comm. Expres. Aug. 27, 2000
No. CC: 3775
Bonded Thru: Official Notary Service
1-(800) 723-0121

# CERTIFICATE DESIGNATING PLACE OF BUSINESS OF DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

IN COMPLIANCE WITH SECTION 48.09], FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST--THAT PENTA MED, INC. DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF CORAL GABLES, STATE OF FLORIDA, HAS NAMED ANTHONY R. GRAHAM, LOCATED AT 679 DESTACADA CIRCLE, CITY OF CORAL GABLES, FL 3315-8002, STATE OF FLORIDA, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

CORPORATE OFFICER)

TITLE: RESIDENT LAKY OF SIMIL AND ASSECUTION OF SIMIL AND ASSECUTION OF SIMIL OF S

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE

(REGISTERED AGENT)

DATE: