

P960000 96141

TRANSMITTAL LETTER

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

600002011126--0
-11/21/96--01049--006
*****78.75 *****78.75

SUBJECT: INFUSTAT INC.
(Proposed corporate name - must include suffix)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 NOV 20 AM 9:44

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

FROM: Albert Tellechea
Name (printed or typed)
2445 S.W 28 Street
Address
Coconut Grove, Florida 33133
City, State & Zip
(305) 229-9437
Daytime Telephone number

ST
11/26

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

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.

ARTICLE I NAME

The name of the corporation shall be: INFUSTAT INC.

ARTICLE II PRINCIPAL OFFICE

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

2445 S.W 28 Street
Coconut Grove, FL 33133

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 5000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: Albert Tellechea
2445 S.W 28 Street
Coconut Grove, FL 33133

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 NOV 20 AM 9:44

ARTICLE V INCORPORATOR(S)

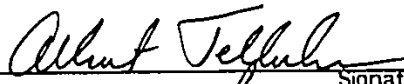
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Albert Tellechea
1834 S.W 94 Court
Miami, Fl 33165

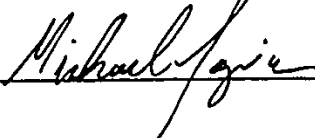
Michael Tapia
10321 SW 99 Ave
Miami, Fl 33176

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

13 day of November, 1996.



Signature



Signature

Signature

**Articles of Incorporation
Filing Fee - \$35**

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 DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: INFUSTAT INC.

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

Albert Tellechea

(Name)

2445 S.W. 28 Street

(P.O. Box not acceptable)

Coconut Grove, Fl 33133

(City/State/Zip)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 NOV 20 AM 9:44

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.

Albert Tellechea

(Signature)

11/13/96

(Date)