

**P96000097897**

**CAPITAL CONNECTION, INC.**

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870  
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302  
 TOLL FREE No. 1-800-342-8062  
 FAX (904) 222-1222

NAME \_\_\_\_\_  
 FIRM \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 \_\_\_\_\_  
 PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
 One Day Service Two Day Service

To us via \_\_\_\_\_ Return via \_\_\_\_\_

Matter No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

**FILED**

96 DEC -4 PM 2:37  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

*W96-25178*

AL DEC 4 1996

REQUEST TAKEN CONFIRMED APPROVED  
 DATE \_\_\_\_\_  
 TIME \_\_\_\_\_ CK No. \_\_\_\_\_  
 BY AAP \_\_\_\_\_

WALK-IN Will Pick Up 123 1100

RE: Mednews Corporation

	C.C. FEE.	DISBURSED
<input type="checkbox"/> Capital Express™		
<input checked="" type="checkbox"/> Art. of Inc. File		
<input type="checkbox"/> Corp. Record Search		
<input type="checkbox"/> Ltd. Partnership File		
<input type="checkbox"/> Foreign Corp. File		
<input checked="" type="checkbox"/> ( ) Cert. Copy(s)		
<input type="checkbox"/> Art. of Amend. File		
<input type="checkbox"/> Dissolution/Withdrawal		
<input type="checkbox"/> C U S-		
<input type="checkbox"/> Fictitious Name File <u>700002017397--0</u>		
	<u>-12/03/96--01023--009</u>	
<input type="checkbox"/> Name Reservation	<u>***122.50</u>	<u>***122.50</u>
<input type="checkbox"/> Annual Report/Reinstatement		
<input type="checkbox"/> Reg. Agent Service		
<input type="checkbox"/> Document Filing		
<input type="checkbox"/> Corporate Kit		
<input type="checkbox"/> Vehicle Search		
<input type="checkbox"/> Driving Record		
<input type="checkbox"/> Document Retrieval		
<input type="checkbox"/> UCC 1 or 3 File		
<input type="checkbox"/> UCC 11 Search		
<input type="checkbox"/> UCC 11 Retrieval		
<input type="checkbox"/> File No.'s, _____ Copies		
<input type="checkbox"/> Courier Service		
<input type="checkbox"/> Shipping/Handling		
<input type="checkbox"/> Phone ( )		
<input type="checkbox"/> Top Priority		
<input type="checkbox"/> Express Mail Prep.		
<input type="checkbox"/> FAX ( ) pgs.		
<b>SUBTOTALS</b>		

FEE.....	\$ _____
DISBURSED.....	\$ _____
SURCHARGE.....	\$ _____
TAX on corporate supplies.....	\$ _____
SUBTOTAL.....	\$ _____
PREPAID.....	\$ _____
BALANCE DUE.....	\$ _____
	\$ _____

Please remit invoice number with payment  
 TERMS: NET 10 DAYS FROM INVOICE DATE  
 1 1/2% per month on Past Due Amounts  
 Past 30 Days, 18% per Annum.

**THANK YOU**  
 from  
 Your Capital Connection



RECEIVED

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

96 DEC -1 11:34  
DIVISION OF CORPORATIONS

December 2, 1996

CAPITAL CONNECTION  
P.O. BOX 10349  
TALLAHASSEE, FL 32302

SUBJECT: MEDNEWS CORPORATION  
Ref. Number: W96000025178

*Collected*

We have received your document for MEDNEWS CORPORATION 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 document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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) 487-6928.

Agnes Lunt  
Corporate Specialist

Letter Number: 296A00054012

**FILED**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## **ARTICLES OF INCORPORATION OF MEDNEWS CORPORATION**

The undersigned Incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

### **Article I, Name**

The name of the corporation shall be:  
Mednews Corporation

### **Article II, Mailing Address**

The mailing address of this corporation shall be:  
610 Camden Rd. - Altamonte Springs, FL., 32714

### **Article III, Shares**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:  
1000 Shares with \$ 1.00 Par Value.

### **Article IV, Initial Registered Agent and Street Address**

The name and address of the initial registered agent is:  
Edegar A. Pinto  
5850 Lakehurst Dr. # 100 - Orlando, FL., 32819

### **Article V, Incorporator.**

The name and address of the Incorporator to these Articles of Incorporation is:

Edegar A. Pinto  
Address

5850 Lakehurst Drive suite 100, Orlando, FL., 32819.

**Continuation, Page 2**

**Article VI, Purpose.**

The purpose of this corporation shall be to commerce, sell, buy, import and export all types of merchandise goods and services , as well as to be the representative of other companies if so is desired. This Corporation will specially trade in the medicine, vitamin, medical equipment, and raw material for the pharmaceutical Industries commerce and distribution areas. It will deal with international and national corporations and individuals alike, always respecting the regulations in existence. These objectives should not affect the capability to do all other businesses under the Laws of the United States of America and the State of Florida.

**Article VII, Initial Board of Directors and Officers.**

The names and Post Office Addresses of the members of the first board of directors and Officers are:

**Elcemar de Almeida - President, VP, Treasurer, Secretary and Director**

**Postal address at:**

**610 Camden Road, Altamonte Springs, Fl., 32714.**

Continuation, Page 3

**Affidavit**

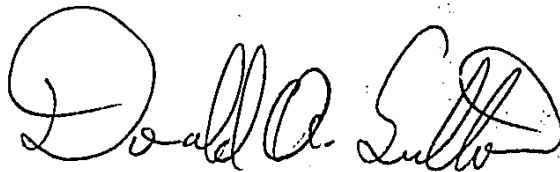
**State of Florida, Orange County.**

**Before me this day personally appeared Edegar A. Pinto, who being duly sworn, depose and say that he is the Incorporator of Mednews Corporation, and is hereby duly authorized, responsible and apt to incorporate according to the Statutes or the State of Florida.**



**Edegar A. Pinto**

**Sworn to and subscribed before me this November 18, 1996.**



**Notary Public**

**DONALD A. SUTTON**  
Notary Public, State of Florida  
My Comm. Expires May 31, 1998  
No. CC 378691  
Bonded Thru Official Notary Service

# 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: MEDNEWS CORPORATION

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

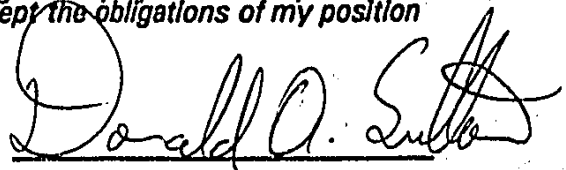
Edegar A. Pinto  
(Name)  
5850 Lakehurst Dr. # 100  
(P.O. Box ~~not~~ acceptable)  
ORLANDO, FL 32819  
(City/State/Zip)

FILED  
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SECRETARY OF STATE  
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 performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*



(Signature)



DONALD A. SUTTON  
Notary Public, State of Florida  
My Comm. Expires May 31, 1998  
No. CC 376691  
Bonded Thru Official Notary Service

STATE OF FLORIDA  
COUNTY OF Dade

The foregoing instrument was acknowledged before  
me this 3 day of DEC, 1996, by EDEGAR

A. Pinto

Personally Known ☒ OR Produced Identification ☐

Type of Identification Produced \_\_\_\_\_