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FLORIDA DIVISION OF CORPORATIONS
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TO: DIVISION OF CORPORATIONS

FAX #1 (904)922-4001

FROM: FAS-T CORP. AGENTS, INC.

ACCT#: 071001002335

CONTACT: LIDIA FERNANDEZ

PHONE: (305)599-0839

FAX #: (305)716-0346

NAME: AMERICAN MEDICAL COURIER INC.

AUDIT NUMBER..... H97000009733

DOC TYPE..... FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS...

PAGES..... 3

CERT. COPIES.....1

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ARTICLES OF INCORPORATION OF

AMERICAN MEDICAL COURIER INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE LNAME

The name of the corporation shall be: AMERICAN MEDICAL COURIER INC.

The principal place of business of this corporation shall be:

4681 N.W. 93rd Doral Ct. Miami, florida 33166

ARTICLE IL NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 1,000 Shares at \$1.00 Par Value.

ARTICLE IV TERM OF EXISTENCE This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

Raul Medina Jr. 4681 N.W. 93rd Doral Ct. Miami, Fl 33166

Prepared by: Raul Medina Jr. 4681 N.W. 93rd Dogal Ct. Miami, Fl 33166 (305) 888-4100

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ARTICLE VI INCORPORATORIS

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

Raul Medina Jr. 4681 N.W. 93rd Doral Ct. Miami, Fl 33166

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of incorporation this 12th day of June 1997.

Signature(s) of Incorporator(s)

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, and an understanded corporation, organized under the laws of the section 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:	
AMERICAN MEDICAL COURIER INC.	
2. The name and address of the regist	ered agent and office is:
Raul Medina Jr. 4681 N.W. 93rd Doral Ct.	
(P.O. BOX NOT ACCEPTABLE)	
Miami, Fl 33166	
(CITY/STATE/ZIP)	
SIGNATU	ORE TO THE TOTAL OF THE TOTAL O
TITLE	DIRECTOR
DATE	0612/97
HAVING BEEN NAMED TO ACCEPT SERVABOVE STATED CORPORATION, AT THE CERTIFICATE, I HEREBY AGREE TO ACT FURTHER AGREE TO COMPLY WITH STATUTES RELATIVE TO THE PROPER AND OF MY DUTIES, AND I ACCEPT THE DUSECTION 607.325, FLORIDA STATUTES. SIGNATURE	PLACE DESIGNATED IN THIS IN THIS CAPACITY, AND I THE PROVISIONS OF ALL COMPLETE PERFORMANCE TIES AND OBLIGATIONS OF
DATE	06/12/97