

FP8800020593

TRANSMITTAL LETTER

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

800002435498--9
-02/19/98--01080--007
****131.25 ****131.25

SUBJECT: MEDIDENTS 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: JUAN MEDINA
Name (Printed or typed)

3910 NORTHDALIE BLVD. #204
Address

TAMPA, FL 33624
City, State & Zip

(813) 264-2410
Daytime Telephone number

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 MAR -4 AM 11:51

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

~~4498 3925~~
3-4-98
2-23-98
RS



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

February 23, 1998

JUAN MEDINA
3910 NORTHDAL BLVD., SUITE 204
TAMPA, FL 33624

SUBJECT: MEDIDENTS INC.
Ref. Number: W98000003925

We have received your document for MEDIDENTS INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of 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 (850) 487-6995.

Wanda Sampson
Document Specialist

Letter Number: 198A00010082

ARTICLES OF INCORPORATION

OF

MEDIPON INC.

FILED STATE
SECRETARY OF CORPORATIONS
98MAR-14 AM 11:51

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 I. NAME, AND PLACE OF BUSINESS

The name of the corporation shall be: **MEDIPON INC.**

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

15811 Mapledale Blvd. Suite No. 102 Tampa, Florida 33624

ARTICLE II. 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, county, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding is 1000 shares at \$1.00 par value each. The initial issue to form the capital stock is 100 shares at \$1.00 each.

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):

VIVIAN MEDINA-PONCE	PRESIDENT	4113 Apple blossom Rd. Lutz, Fl 33549
ROLANDO PONCE	V-PRESIDENT	4113 Apple blossom Rd. Lutz, Fl 33549
JUAN MEDINA	TREASURER	3901 Yellow Finch Ln. Lutz, Fl 33549
OLGA MEDINA	V-TREASURER	3901 Yellow Finch Ln. Lutz, Fl 33549

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation and the numbers of shares which each agrees to take as subscribers are:

VIVIAN MEDINA-PONCE	4113 Apple blossom Rd. Lutz, Fl 33549	25 Shares
ROLANDO PONCE	4113 Apple blossom Rd. Lutz, Fl 33549	25 Shares
JUAN MEDINA	3901 Yellow Finch Ln. Lutz, Fl 33549	25 Shares
OLGA MEDINA	3901 Yellow Finch Ln. Lutz, Fl 33549	25 Shares

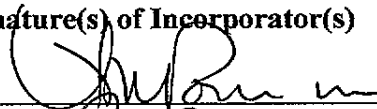
ARTICLE VII. INITIAL REGISTER AGENT AND STREET ADDRESS.


The name and Florida street address of the initial agent is:

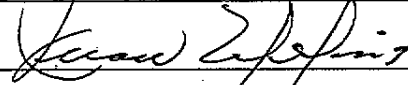
JUAN MEDINA
3901 YELLOW FINCH LN.
LUTZ, FLORIDA 33549

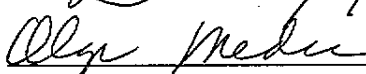
IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this 16th day of February, 1998

Signature(s) of Incorporator(s)







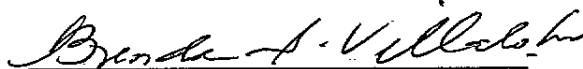


**STATE OF FLORIDA
COUNTY OF HILLSBOROUGH.**

THE FOREGOING instrument was acknowledge and sworn to before me this 18th
day of February 1998, by Juan Medina, incorporator of
MEDIPON INC.



Brenda J Villalobos
My Commission CC622407
Expires February 17, 2001



Notary Public.

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT / REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, 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.

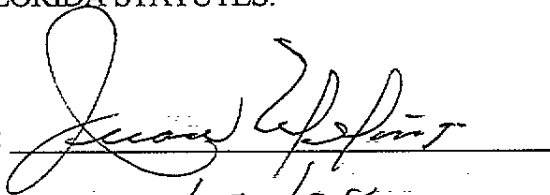
1.- The name of the corporation is : MEDIPON, INC.

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

JUAN MEDINA
3901 YELLOW FINCH LANE LUTZ, FLORIDA 33549

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, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE:



DATE:

2/18/98

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 MAR -4 AM 11:52