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HAZARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

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MIAMI, FLORIDA (305)552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

700002579987--8

-07/06/98-01024-015

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OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1.

(Corporation Name)

(Document #)

2.

(Corporation Name)

(Document #)

3.

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(Document #)

4.

(Corporation Name)

(Document #)



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2:00



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Photocopy



Certificate of Status

NEW FILINGS

☒ Profit

☐ NonProfit

☐ Limited Liability

☐ Domestication

☐ Other

AMENDMENTS

☐ Amendment

☐ Resignation of R.A., Officer/Director

☐ Change of Registered Agent

☐ Dissolution/Withdrawal

☐ Merger

OTHER FILINGS

☐ Annual Report

☐ Fictitious Name

☐ Name Reservation

REGISTRATION/
QUALIFICATION

☒ Foreign

☒ Limited Partnership

☒ Reinstatement

☒ Trademark

☒ Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

July 7, 1998

LAZARUS

MIAMI, FL

SUBJECT: REAL MED SERVICES INC.
Ref. Number: W98000015443

We have received your document for REAL MED SERVICES INC.. However, the document has not been filed and is being returned for the following:

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) 487-6934.

Loria Poole
Corporate Specialist

Letter Number: 798A0003638

RECEIVED
DIVISION OF CORPORATIONS
JUL 9 1998
98 JUL -9 PM 2:46

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: UNIBILL INC.

FILED
98 JUL -9 PM 2:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

P.O. BOX 832430 MIAMI, FL 33283

ARTICLE III SHARES

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

1000.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ALHMED MORALES

4660 N.W. 3rd St 8
MIAMI, FL 33126

LAZARUS

2201440

P.03

ARTICLE V INCORPORATOR(S)

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

ALHMED MORALES

P.O. BOX 832430 MIAMI, FL 33283

REMBERTO ESPINOSA

ARTICLE VI DIRECTOR(S)

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

ALHMED MORALES


PRESIDENT

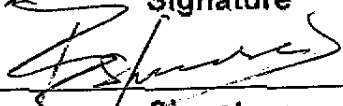
P.O. BOX 832430 MIAMI, FL 33283

REMBERTO ESPINOSA

VICE-PRESIDENT.

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 2 day of JULY, 19 98.



Signature


Signature

Signature

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 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: UNIBILL INC.

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

ALHMED MORALES

(NAME)

4660 N.W. 3 st. Ste. 8

(P.O. BOX NOT ACCEPTABLE)

MIAMI, FL 33126

(CITY/STATE/ZIP)

98 JUL -9 PM 2:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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 *Almorales*

DATE 07-02-98