

PROUD 72948

OFFICE USE ONLY (Document #)

LAZARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

3320 S.W. 87th AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

OFFICE USE ONLY

98 AUG 20 PH 3:02
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

CORP.

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

1. UNITED MEDICAL REPAIRS & SALES, CORP.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

- Walk in Pick up time 2:00 Certified Copy
 Mail out Will wait Photocopy Certificate of Status

98 AUG 20 AM 11:16
DIVISION OF CORPORATION

RECEIVED

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

4000002620964--9
-08/20/98--01058--002
*****78.75 *****78.75

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input checked="" type="checkbox"/>	Foreign
<input checked="" type="checkbox"/>	Limited Partnership
<input checked="" type="checkbox"/>	Reinstatement
<input checked="" type="checkbox"/>	Trademark
<input checked="" type="checkbox"/>	Other

Examiner's Initials

ARTICLES OF INCORPORATION

FILED
98 AUG 20 PM 3:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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:

UNITED MEDICAL REPAIRS & SALES, CORP..

ARTICLE II PRINCIPAL OFFICE

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

9674 NW 10th AVE LOT D-411
MIAMI, FLORIDA 33150

ARTICLE III SHARES

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

600 shares common stock \$1.00 Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MARILEE SANTIAGO
9674 NW 10th AVE LOT D-411
MIAMI, FLORIDA 33150

ARTICLE V INCORPORATOR(S)

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

MARILEE SANTIAGO
9674 NW 10th AVE LOT D-411
MIAMI, FLA 33150

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

18th day of AUGUST, 1998.


Signature

Signature

Signature

Articles of Incorporation
Filing Fee - \$

**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: UNITED MEDICAL REPAIRS & SALES, CORP.

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

MARILEE SANTIAGO

(Name)

9674 NW 10th AVE LOT D-411

(P.O. Box not acceptable)

MIAMI, FLA 33150

(City/State/Zip)

98 AUG 20 PM 3: 02
FILED
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)

August 18, 1998
(Date)