

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

L00002757771---6 -01/28/99--01082--011 \*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT:	MED WHEELS, INC. (Proposed corpor	rate name - must include suf	fix)					
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 of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	☐ \$87.50 Filing Fee, Certified Copy & Certificate o Status  PY REQUIRED					
FROM:	JoAnn: Smith  Name (Printed or typed)							
	154 Serena Court	Address	드爿	99				
	North Fort Myers,	Fl. 33903 State & Zip	ETARY OF	JAN 28 AM 9:				
	(941) 997-5197 Daytime	Telephone number		M 9: 24				

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

## ARTÍCLES OF INCORPORATION

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

A	RTIC	77.70	T	NAME
_				14471144

The name of the corporation shall be:

MED WHEELS, INC.

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SECRETARY OF STATE
FAILAHASSEE, FLORIDI

ARTICLE II PRINCIPAL OFFICE

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

154 Serena Court

North Fort Myers, Florida 33903

ARTICLE III SHARES

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

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

JoAnn Smith

154 Serena Court

North Fort Myers, Fl. 33903

## ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

JoAnn Smith

.154 Serena Court

North Fort Myers, Fl. 33903

JoAnn Smith

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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

JoAnn Smith

Signature/Registered Agent

Date