ONLY (Do OFFICE U CORPORATE FILING SERVICE, INC. (Requestor's Name) 3320 S.W. 87th AVENUE (Address) (305)552-5973 MIAMI, FLORIDA (City, State, Zip) *****78.75 LOCAL REPRESENTATIVE TALLAHASSEE OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) Pick up time 2.00 Certified Copy Walk in Certificate of Status Photocopy Will wait Mail out AMENDMENTS NEW FILINGS Amendment **Profit** Resignation of R.A., Officer/Director NonProfit DIVISION OF CURPORATION Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION OTHER FILNGS **QUALIFICATION** Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark

Other

Examiner's Initials

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 | NAME

The name of the corporation shall be:

DeLishe Medical Equipment

ARTICLE II PRINCIPAL OFFICE

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

3160. N.W. 7 St. MiAMIL FIA. 33125

ARTICLE III SHARES

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

(no :

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MANUEL. Dehishe.

2425. N.W. 23 Ct. Minimi -171A. 33142

ARTICLE V INCORPORATOR(S)

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

PELISLE MEDICAL Equipment The.

3160. N.W. 751

WIAMY FIR-33125

ARTICLE VI DIRECTOR(S)

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

MANUEL DELISLE 7425.N.W.33 ct. MiAMI.FIA 33142

The undersigned incorporator(s) has(have)	executed	these Articles o	f
Incorporation this	_ day of	_}	, 19 <u>99</u> .	

Signature

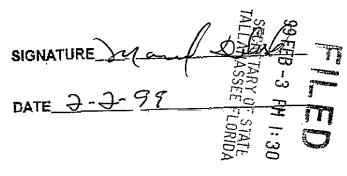
Articles of Incorporation Filing Fee - \$35

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.

name and address of the registered agent and office is: Womue (NAME) 3160・ル・ル・ う 気 (P.O. BOX NOT ACCEPTABLE)	and address of the ri	egistered agent a:	nd office is:	
3160, N.W. 7 St	Mamuel Delish	/		
3160, N.W. 7 ST (P.O. BOX NOT ACCEPTABLE)		(NAME)	*	
(P.O. BOX NOT ACCEPIABLE)	3160. N.W. 75	₹	·	<u>,</u>
(*	(P.O. BOX	NOT ACCEPTABL	E)	•
	MIAMI-FIA:	Y/STATE/ZIP)		

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PPOCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS RECISTERED 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 I AMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS LEGISTERED AGENT.



REGISTERED AGENT FILING FEE: \$35.00