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FILED 99 FEB 22 AM 8: 38

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



SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SUBJE	CT
COMPA	v.

Proposed corporate name - must include suffix

Enclosed is an original \$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 of Status
FROM:	Sar V Name (Pr	D Krep S	
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NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 25, 1999

GARY D KREPS 18161 OLD DOMINION CT FT MYERS, FL 33908

SUBJECT: MEDSAFETY, INC. Ref. Number: W99000004686

We have received your document for MEDSAFETY, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

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.

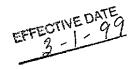
If you have any questions concerning the filing of your document, please call (850) 487-6919.

Beth Register Corporate Specialist Supervisor

Letter Number: 799A00008676

WORK #

941-482-5-300 941-482-5-300



ARTICLES 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.

ARTICLE I NAME

The name of the corporation shall be: Medsafety, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 18161 Old Dominion Court, Fort Myers, Fl 33908

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100,000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: Gary D. Kreps, 18161 Old Dominion Court, Fort Myers, Fl 33908

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are: Gary D. Kreps, 18161 Old Dominion Court, Fort Myers, Fl 33908

ARTICLE VI EFFECTIVE DATE

The effective date requested: March 1, 1999

Signature/Incorporator

2-15-99

-Date

Having been named as registered agent and to accept service for the above stated corporation at the place designated in this certificate. I hereby accept the appointment of registered agent and agree to act in this capacity. I further agree to comply with the provisions of all the 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/Registered Agent

Date