

TRANSMITTAL LETTER

P990000028619

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

SUBJECT: Y₂ M Medical Equipment, Inc.
(Proposed corporate name - must include suffix)

900002816399--7
-03/24/99-01026-889
*****18.75 *****18.75

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

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

Pedro e. Pared

Name (Printed or typed)

741 NW 207 Terrace

Address

Pembroke Pines, FL 33029

City, State & Zip

954-430-0694

Daytime Telephone number

FILED
99 MAR 24 PM 3:09
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

ajc 3/29

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:

Y = M Medical Equipment, INC.

ARTICLE II PRINCIPAL OFFICE

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

1800 West 49 Street, Suite 324
Hialeah, Florida 33012

ARTICLE III SHARES

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Yvette NAVARRO
3890 West 4 Ave
Hialeah, FL 33012

ARTICLE V INCORPORATOR

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

Yvette NAVARRO
3890 West 4 Ave.
Hialeah, FL 33012



Signature/Incorporator

3/19/99

Date

(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



Signature/Registered Agent

3/19/99

Date

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA