

TRANSMITTAL LETTER

P9900055520

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

700002899547--3  
-06/09/99--01059--006  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: JMT Medical Inc.  
(Proposed corporate name - must include suffix)

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: JAMES M. THOMASCHLIS  
Name (Printed or typed)

15763 Cypress Creek Lane  
Address

Wellington, FL 33414  
City, State & Zip

(561) 333-0093  
Daytime Telephone number

FILED  
99 JUN 18 PM 12:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

~~W99-136877~~  
PH 6/11/99



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

June 11, 1999

JAMES M. THOMASELLI  
15763 CYPRESS CREEK LANE  
WELLINGTON, FL 33414

SUBJECT: JMT MEDICAL INC.  
Ref. Number: W99000013687

We have received your document for JMT MEDICAL INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

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) 487-6915.

Pamela Hall  
Document Specialist

Letter Number: 099A00031631

# 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.

FILED

99 JUN 18 PM 12:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE I NAME

The name of the corporation shall be:

*JMT Medical Inc.*

## ARTICLE II PRINCIPAL OFFICE

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

*15763 Cypress Creek Lane  
Wellington, FL 33414*

## ARTICLE III SHARES

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

*1000 at PAR*

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

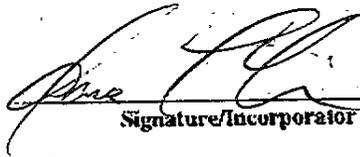
The name and Florida street address of the initial registered agent are:

*JAMES M. THOMASOLI → 15763 Cypress Creek Lane  
Wellington, FL 33414*

## ARTICLE V INCORPORATOR

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

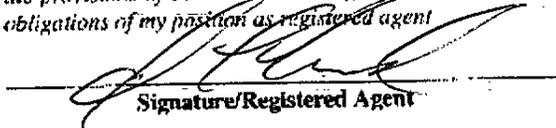
*JAMES M. THOMASOLI → 15763 Cypress Creek Lane  
Wellington, FL 33414*

  
Signature/Incorporator

*6-4-99*  
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

*6-4-99*  
Date