

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 200002967502--0 -08/23/99-01152--008 \*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT:	Pyramid Marine Proposed corpor	ledical Ti ate name - must include suf	ransportat	ion Inc.	
	,				
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	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate		
		ADDITIONAL CO	PY REQUIRED		
FROM: Pyramid Hedical Transportation Name (Printed or typed)					
13337 SW 61 Ter.					
Miami F1 33183 City, State & Zip $\Xi_{\infty}$ $\omega$					
Daytime Telephone number  Daytime Telephone number					

K. Rone AUG 2 5 1999

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

### 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:

#### 'PYRAMID MEDICAL TRANSPORTATION INC.

# ARTICLE II PRINCIPAL OFFICE

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

13337 SW 61 Terrace Miami, FI 33183

### ARTICLE III SHARES

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

\$ 500.00 (Five Hundred)

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Miriam A. Ponce (President) 13337 SW 61 Ter. Miami, Fl 33183

### ARTICLE V INCORPORATOR

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

Miriam A. Ponce (President) 13337 SW 61 Terrace. Miami, Fl 33183 Ivel Rojas (Vice President) 4785 SW 4 Street. Miami, Fl 33134

Hector Giral (Secretary) 451 East 17th Street Hialeah, Fl 33010 Gladys Hernandez (Treasurer)
9427 Fountainbleau Blvd. 

→ 203
Miami, Fl 33172

SECRETARIASSEE, FI

	IN WITNESS WHEREOF, the undersignes income	rporator(s) has (have) executed these
/	Articles of Incorporation this, 19th Day of August	, 1999.
	Mariand Some	Sve Daras
	Signature / Incorporator	Signature / Incorporator
	8/50/99 Date	8/20/99
	Date	/ Date '
	History	Shade March 1
	Signature / Incorporator	Signature Incorporator
	8 19 99 Date	<u>August</u> 20, 1999  Date
	Having been named as registered agent and to accept stated corporation at the place designated in this cerappointment as registered agent and agree to act in comply with the provisions of all statues relating to of my duties, and I am familiar with and accept the agent.	rtificate, I hereby accept the this capacity. I further agree to the proper and complete performance
<b>S</b>	agent.	clanta

Date