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3/13/96 FLORIDA DIVISION OF CORPORATIONS 10:36 AM
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TO: DIVISION OF CORPORATIONS
DEPARTMENT OF STATE
STATE OF FLORIDA

FROM: FAB-T CORP. AGENTS, INC.
8405 NW 53RD ST
SUITE C-100

3/13/96 FLORIDA DIVISION OF CORPORATIONS 10:36 AM
PUBLIC ACCESS SYSTEM
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TO: DIVISION OF CORPORATIONS
DEPARTMENT OF STATE
STATE OF FLORIDA
409 EAST GAINES STREET
TALLAHASSEE, FL 32399
FAX: (904) 922-4000

FROM: FAB-T CORP. AGENTS, INC.
8405 NW 53RD ST
SUITE C-100
MIAMI FL 33166- 000
CONTACT: LIDIA FERNANDEZ
PHONE: (305) 599-0839
FAX: (305) 592-9591

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DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
NAME: R & J MEDICAL EQUIPMENT AND SUPPLIES CORP.
FAX AUDIT NUMBER: H96000003526
DATE REQUESTED: 03/13/1996
CURRENT STATUS: REQUESTED
TIME REQUESTED: 10:36:09
CERTIFIED COPIES: 0
CERTIFICATE OF STATUS: 1
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96 MAR 14 PM 12:21

RECEIVED
96 MAR 13 PM 12:58
DIVISION OF CORPORATIONS

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 13, 1996

FAS-T CORP. AGENTS, INC.

MIAMI, FL

SUBJECT: R & J MEDICAL EQUIPMENT AND SUPPLIES CORP.
REF: W96000005554

We received your electronically transmitted document. However, the document has not been filed and needs the following corrections:

PLEASE COMPLETE THE PRINCIPAL LOCATION IN ARTICLE I.

Please return 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 (904) 487-6934.

Loria Poole
Corporate Specialist

FAX Aud. #: H96000003526
Letter Number: 296A00011315

96 MAR 16 AM 10:39

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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96 MAR 14 PM 12:21

ARTICLES OF INCORPORATION

OF

R & J MEDICAL EQUIPMENT AND SUPPLIES CORP.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: R & J MEDICAL EQUIPMENT AND SUPPLIES CORP.

The principal place of business of this corporation shall be: 6595 NW 36th St.
Miami, Fl 33166

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 500 of $1.00 each ($500.00)

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are): ROLANDO ALVAREZ
5553 NW 193 LN
OPALOCKA FL 33055

Prepared by: Rolando Alvarez
5553 N.W. 193th Lane
Opalocka Fl 33055
(305) 883-8714

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ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

ROLANDO ALVAREZ/PRESIDENT
5553 NW 193 LN
OPALOCKA, FL 33055

EMILIO ALVAREZ/VICE PRESIDENT
1300 W 41th ST.
HIALEAH , FL 33055

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 11 day of March, 1996.

Signature(s) of Incorporator(s)

PRESIDENT _____

VICE/PRESIDENT _____

_____

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

1. The name of the corporation is: R & J MEDICAL EQUIPMENT AND SUPPLIES CORP.

2. The name and address of the registered agent and office is:

ROLANDO ALVAREZ
(NAME)

5553 NW 193 LN
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

OPALOCKA, FL 33055
(CITY/STATE/ZIP)

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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)

03/12/96
(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314