F/100000848

(Requestor's Name)	
(Address)	- IIIIIIIIIIII
(Address)	<u>ان</u>
(City/State/Zip/Phone #)	.
PICK-UP WAIT MAIL	•
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	$Q_{\mathbf{i}}$
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Office Use Only

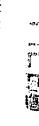


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KALGON, ANGURD

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Oxford	Diabetic Supply Inc.
DOCUMENT NUMBER:	F11000000848
The enclosed Affidavit by Foreign C submitted for filing.	Corporation to Change/Add Officer(s) and/or Director(s) and fee are
Please return all correspondence con-	cerning this matter to the following:
Melanic Feather Name of Contact Per	'man
Oxford Diabetic Surpering	ipply, Inc.
304 Park Ave S Address	Sie ZIR
New York NY 10 City/State and Zip C	2010-4317 Code
Mfeatherman @ oxfo E-mail address: (to be used for futu	preddia betic. com ure annual report notification)
For further information concerning th	his matter, please call:
Melanie Featherman Name of Contact Person	at (800) 557 - 0639 Area Code & Daytime Telephone Number
Enclosed is a check made payable to	the Florida Department of State for the following amount:
\$35.00 Filing Fee \$43.75 Filin Certificate	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661.Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

March 23, 2011

MELANIE FEATHERMAN OXFORD DIABETIC SUPPLY, INC. 304 PARK AVENUE S., STE. 218 NEW YORK, NY 10010-4317

SUBJECT: OXFORD DIABETIC SUPPLY, INC.

Ref. Number: F11000000848

We have received your document for OXFORD DIABETIC SUPPLY, INC. and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

PLEASE PROVIDE US WITH OFFICER SIGNATURE.

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 (850) 245-6908.

Sylvia Gilbert Regulatory Specialist II

Letter Number: 811A00007109

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FLORIDA DEPARTMENT OF STATE **DIVISION OF CORPORATIONS**

AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S) AND/OR DIRECTOR(S)

(Note: Applicable only during the	first calendar year of qualification)
- /	rs on the records of the Florida Department of State is:
number is <u>F11000000 848</u>	n Florida on <u>02/23/2011</u> and its Florida document
3. This corporation was formed under the laws of _	New York
4. The name and address of each officer and/or dir	
Title: President + Chairman	Name and Address Edward James Letko
	4 Kelsey Farm Rd
	Milford, NJ 08848
Vice Plesident + Vice Chairman	Sritlana Letko
	9 Kelsey Farm Rd
	Milford NJ 08848
	•
	
_	
(Attach additional p	ages if necessary)
	0
gnature of an officer or director	Title of person signing
dward James Letko	FILING FEE \$35
ped or printed name of person signing	

CD0010107 /0/A01

Make checks payable to Florida Department of State and Mail to: Division of Corporations PO Box 6327 Tallahassee, FL 32314