

N/9900002574

TRANSMITTAL LETTER

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 APR 23 PM 1:12

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

SUBJECT: HOME OXYGEN USER RESOURCE, INC.  
(Proposed corporate name - must include suffix)

800002849728--9  
-04/23/99--01085--007  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

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

ADDITIONAL COPY REQUIRED

FROM: DEBORAH D. ASH  
Name (Printed or typed)

602 DOUGLAS AVE  
Address

DUNEDIN FL 34698  
City, State & Zip

(727) 734-7610  
Daytime Telephone number

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

D. BROWN APR 27 1999

# ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

## ARTICLE I NAME

The name of the corporation shall be:

HOME OXYGEN USER RESOURCE, INC.

## ARTICLE II PRINCIPAL OFFICE

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

602 DOUGLAS AVE DUNEDIN FL 34698  
P.O. BOX 2615 DUNEDIN, FL 34698-2615

## ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is(are): THE PURPOSE OF HOME OXYGEN USER RESOURCE, INC IS TO ASSIST, EDUCATE AND PROTECT PATIENTS DEPENDENT ON SUPPLEMENTAL OXYGEN.

## ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is:

ELECTED BY SIMPLE MAJORITY OF THE BOARD

## ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

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

DEBORAH D. ASH  
602 DOUGLAS AVE  
DUNEDIN, FL 34698

## ARTICLE VI INCORPORATOR

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

DEBORAH D. ASH  
602 DOUGLAS AVE  
DUNEDIN FL 34698  
*Deborah Ash*

Signature/Incorporator

4-21-99

Date

(An additional article must be added if an effective date is requested.)

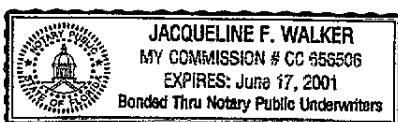
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

*Deborah Ash*

Signature/Registered Agent

4-21-99

Date



*Jacqueline Walker*

STATE: FLORIDA  
COUNTY: PINELLAS

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