

P000000012146

TRANSMITTAL LETTER

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

100003116741--3  
-01/31/00--01129--001  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

**SUBJECT:** NATIONAL WELLCARE DIABETIC SUPPLIES, 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

☒ \$122.50  
Filing Fee  
& Certified Copy

☒ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

**FROM:** JUDITH R. SCHWARTZ  
Name (Printed or typed)

554 NW 108th AVENUE  
Address

CORAL SPRINGS, FL 33071  
City, State & Zip

954-344-7902  
Daytime Telephone number

FILED  
00 JAN 31 PM 1:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

2/3

## 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:

NATIONAL WELLCARE DIABETIC SUPPLIES, INC.

### ARTICLE II PRINCIPAL OFFICE

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

1475 BANKS ROAD  
MARGATE, FLORIDA 33063

Mailing Address:

c/o JUDITH R. SCHWARTZ  
554 NW 108th AVE.  
CORAL SPRINGS, FL 33071

### ARTICLE III SHARES

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

300 SHARES

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

ADALBERTO LOPEZ  
10871 NW 4th DRIVE  
CORAL SPRINGS, FL 33071

### ARTICLE V INCORPORATOR

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

JUDITH R. SCHWARTZ  
554 NW 108th AVE  
CORAL SPRINGS, FL 33071

  
Signature/Incorporator

JANUARY 25, 2000

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

JANUARY 25, 2000

Date

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TALLAHASSEE, FLORIDA