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TRANSMITTAL LETTER

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

700003232697--0  
-05/01/00--01098--006  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: STRATTON DME, 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 of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: ANNETTE MCLEAN  
Name (Printed or typed)

11322 STRATTON PARK DRIVE  
Address

TAMPA FL 33617  
City, State & Zip

(813) 987-2687  
Daytime Telephone number

FILED  
00 MAY 11 AM 9:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

W-11493  
g/s/2



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

May 2, 2000

ANNETTE MCLEAN  
11322 STRATTON PARK DR.  
TAMPA, FL 33617

SUBJECT: STRATTON DME, INC.  
Ref. Number: W00000011493

We have received your document for STRATTON DME, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

There can only be one registered agent.

Please return the original and one copy of 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) 487-6878.

Alan Crum  
Document Specialist

Letter Number: 600A00024219

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

## ARTICLE I NAME

The name of the corporation shall be:

STRATTON DME, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

11322 STRATTON PARK DRIVE  
TAMPA FL 33617

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO OWN AND OPERATE ONE OR MORE RETAIL STORES AND TO DO EVERY  
OTHER ACT OR ACTS AND TO ENGAGE IN ACTIVITY WHICH MAY BE PERMITTED UNDER  
THE STATUTES OF THE STATE OF FLORIDA

## ARTICLE IV SHARES

The number of shares of stock is:

ANNETTE MCLEAN 60 SHARES

NADALEE MCLEAN 40 SHARES

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ANNETTE MCLEAN PRESIDENT, TREASURER

11322 STRATTON PARK DRIVE  
TAMPA, FL 33617

NADALEE MCLEAN SECRETARY

11322 STRATTON PARK DRIVE  
TAMPA, FL 33617

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

ANNETTE MCLEAN

11322 STRATTON PARK DRIVE  
TAMPA, FL 33617

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ANNETTE MCLEAN

11322 STRATTON PARK DRIVE  
TAMPA, FL 33617

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this  
certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

4/22/2000

Date

Signature/Incorporator

4/22/2000

Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

00 MAY 11 AM 9:02

FILED