

OFFICE USE ONLY (Document #)

EXPRESS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

3940 W. FLAGLER ST. 2nd FLOOR

(Address)

MIAMI, FL 33134

(305) 444-4994

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. JLS Medical supply Inc  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☐ Walk in ☒ Pick up time \_\_\_\_\_

☒ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy

☐ Certificate of Status

| NEW FILINGS                         |                   |
|-------------------------------------|-------------------|
| <input checked="" type="checkbox"/> | Profit            |
| <input type="checkbox"/>            | NonProfit         |
| <input type="checkbox"/>            | Limited Liability |
| <input type="checkbox"/>            | Domestication     |
| <input type="checkbox"/>            | Other             |

| AMENDMENTS               |                                       |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Amendment                             |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent            |
| <input type="checkbox"/> | Dissolution/Withdrawal                |
| <input type="checkbox"/> | Merger                                |

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/<br>QUALIFICATION |                     |
|--------------------------------|---------------------|
| <input type="checkbox"/>       | Foreign             |
| <input type="checkbox"/>       | Limited Partnership |
| <input type="checkbox"/>       | Reinstatement       |
| <input type="checkbox"/>       | Trademark           |
| <input type="checkbox"/>       | Other               |

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-09/21/00--01031--012

\*\*\*\*\*78.75 \*\*\*\*\*78.75

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

00 SEP 21 AM 11:02

RECEIVED

Examiner's Initials

**ARTICLES OF INCORPORATION**  
**FOR**  
**J L S MEDICAL SUPPLY INC.**

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:

J L S MEDICAL SUPPLY INC.

**ARTICLE II PRINCIPAL OFFICE**

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

12900 S.W. 21 ST.  
MIAMI, FL 33175

**ARTICLE III NATURE**

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

**ARTICLE IV CAPITAL STOCK**

The maximum number shares of stock that this corporation is authorized to have outstanding at any one time is **100** shares of common stock having a par value of **\$1.00** per share.

**ARTICLE V TERM OF EXISTENCE**

This corporation shall exist perpetually.

**ARTICLE VI INITIAL 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):

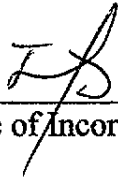
JORGE LUIS SANTOS (P)  
12900 S.W. 21 ST.  
MIAMI, FL 33175

**FILED**  
00 SEP 21 AM 11:36  
SECRETARY OF STATE  
TALLAHASSEE FL 32399

ARTICLE VI INCORPORATOR(S)

The name(s) and address(es) of the Incorporator(s) to these Articles of Incorporation are:

JORGE LUIS SANTOS  
12900 S.W. 21 ST.  
MIAMI, FL 33175



Signature of Incorporator

09-20/00

Date

ARTICLE VIII REGISTERED AGENT

The name and address of the Registered Agent to these Articles of Incorporation is:

JORGE LUIS SANTOS  
12900 S.W. 21 ST.  
MIAMI, FL 33175

Having been named as registered and to accept service of process for the above started 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.

FILED  
SEP 20 11:06  
TALLAHASSEE STATE  
FLORIDA



Signature of Registered Agent

09-20/00

Date