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**Florida Department of State
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To:

Division of Corporations
Fax Number : (850) 922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

FLORIDA PROFIT CORPORATION OR P.A.**F.J. MEDICAL EQUIPMENT, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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CERTIFICATE OF INCORPORATION
OF
F.J. MEDICAL EQUIPMENT, INC.

I, the undersigned, hereby make, subscribe and acknowledge this certificate for the purpose of becoming a corporation under the laws of the State of Florida.

1. The name of the corporation shall be: F.J. MEDICAL EQUIPMENT, INC., and its existence shall be perpetual.

2. The general nature of the business to be transacted shall be to have all other powers provided by the laws of the State of Florida.

3. The capital stock of the corporation shall consist of fifty (50) shares, without nominal par value.

4. The amount of capital with which this corporation shall begin business in not less than five hundred (\$500.00) Dollars.

5. The principal office of this corporation shall be at 458 West 69th Place, Hialeah, Florida 33014.

6. The number of directors shall be at least one (1), and the names and post office addresses of the first Board of Directors and Officers are:

<u>NAME</u>	<u>OFFICE</u>	<u>POST OFFICE ADDRESS</u>
1. Rosa M. Martinez	President	458 West 69 th Place Hialeah, FL 33014
2. Yamileydi A. Veiga	Vice-President	458 West 69 th Place Hialeah, FL 33014

7. The names and post office addresses of the subscribers to this Certificate of Incorporation, and the number of shares each agrees to take, and the consideration therefore, the proceeds of which will amount to not less than one thousand (\$1,000.00) Dollars are as follows:

<u>NAME AND ADDRESS</u>	<u>NO. OF SHARES</u>	<u>CONSIDERATION</u>
1. ROSA M. MARTINEZ	25	\$250.00
2. YAMILEYDI A. VEIGA	25	\$250.00

8. ROSA M. MARTINEZ, whose address is 458 West 69th Place,

This Document prepared by:
Daniel M. Keil, P.A.
3165 West 4th Avenue
Hialeah, Florida 33012
Telephone No. (305) 883-6600
Florida Bar No. 181663

Hialeah, Florida 33014, is hereby designated as the Registered Agent for the corporation.

IN WITNESS WHEREOF, the undersigned hereby subscribe to this Certificate of Incorporation at Hialeah, Florida this 2 day of November, 2000, for the uses and purposes aforesaid.

Rosa M. Martinez
ROSA M. MARTINEZ

Yamileydi A. Veiga
YAMILEYDI A. VEIGA

STATE OF FLORIDA)
COUNTY OF DADE) SS.

BEFORE ME, the undersigned authority, personally appeared ROSA M. MARTINEZ, Subscriber(s) and person(s) described in and who executed the foregoing Certificate of Incorporation, who acknowledged before me that they did subscribe thereto, and did so for the uses and purposes therein contained.

SWORN TO and SUBSCRIBED before me at Hialeah, Dade County, Florida this the 2 day of November, 2000.

OFFICIAL NOTARY SEAL
EMILIA T MURGADO
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC776505
MY COMMISSION EXPIRES SEPT 17 2002

Emilia T Murgado
Notary Public, State of FL.

My Commission Expires:

BEFORE ME, the undersigned authority, personally appeared YAMILEYDI A. VEIGA, Subscriber(s) and person(s) described in and who executed the foregoing Certificate of Incorporation, who acknowledged before me that they did subscribe thereto, and did so for the uses and purposes therein contained.

SWORN TO and SUBSCRIBED before me at Hialeah, Dade County, Florida this the 2 day of November, 2000.

OFFICIAL NOTARY SEAL
EMILIA T MURGADO
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC776505
My Commission Expires SEPT 17 2002

Emilia T Murgado
Notary Public, State of FL.

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CERTIFICATE OF DESIGNATING PLACE OF BUSINESS
OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN
FLORIDA NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In compliance with Section 28.091, Florida Statutes, the following is submitted:

F.J. MEDICAL EQUIPMENT, INC.

desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at the City of Miami, State of Florida, has named ROSA M. MARTINEZ, located at 458 West 69th Place, Hialeah, Florida 33014, as its Agent to accept service of process within Florida.

Rosa M. Martinez
ROSA M. MARTINEZ, President

TITLE President

DATE 11/2/00

I HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

Rosa M. Martinez
RESIDENT AGENT

DATE 11/2/00

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