

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 10, 2001 8:00 am
Secretary of State

04-10-2001 90037 014 ***150.00

DOCUMENT # ~~635125~~ P00000113139

1. Entity Name **LARMAR CORPORATION**
NATIONAL MEDICAL PRODUCTS COMPANY

Principal Place of Business

Mailing Address

9612 SUNBEAM CENTER DR Suite 4
 JACKSONVILLE FL 32257
 US

9612 SUNBEAM CENTER DR, Suite 4
 JACKSONVILLE FL 32257
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

~~59-1930675~~

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~GULP, JAMES D.~~
~~9612 SUNBEAM CENTER DRIVE~~
~~JACKSONVILLE FL 32257~~

Name

Larry L. Thigpen

Street Address (P.O. Box Number is Not Acceptable)

~~9612 Sunbeam Center Dr~~
 12108 Honey Creek Place

City

Jacksonville

FL

Zip Code

32283

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Larry L. Thigpen

Larry L. Thigpen

04/05/01

Signature, typed or printed name of registered agent, or title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P**
 NAME **GULP, JAMES D.**
 STREET ADDRESS **3515 BEAUCLERG CIRCLE N.**
 CITY-ST-ZIP **JACKSONVILLE FL**
 VS
 NAME **GULP, NANCY S.**
 STREET ADDRESS **3515 BEAUCLERG CIRCLE N.**
 CITY-ST-ZIP **JACKSONVILLE FL**

TITLE **P**
 NAME **Larry L. Thigpen**
 STREET ADDRESS **9612 Sunbeam Center Dr.**
 CITY-ST-ZIP **Jacksonville, FL 32257**
 VS
 NAME **Julie K. Thigpen**
 STREET ADDRESS **9612 Sunbeam Center Dr.**
 CITY-ST-ZIP **Jacksonville, FL 32257**

TITLE
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Larry L. Thigpen

Larry L. Thigpen

04/5/01

904-288-8509

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

Attachment

D0033487

State of Florida



Department of State

I certify the attached is a true and correct copy of the Articles of Incorporation of LARMAR CORPORATION, a Florida corporation, filed on December 11, 2000, as shown by the records of this office.

The document number of this corporation is P00000113139.

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capitol, this the
Eleventh day of December, 2000



CR2EO22 (1-99)

Katherine Harris

Katherine Harris
Secretary of State

Attachment

Doc. # 000000113139

D0033487

ARTICLES OF INCORPORATION

OF

LARMAR CORPORATION

ARTICLE I

NAME

Larmar Corporation

ARTICLE II

PRINCIPAL OFFICE

The principal office and mailing address of this corporation is 9612 Sunbeam Center Drive, Suite 3, Jacksonville, Florida 32257.

ARTICLE III

CAPITAL STOCK

This corporation is authorized to issue 1,000 shares of common stock with a part value of Ten Cents (\$0.10) per share, which shares shall be and hereby are designated as "Common Shares." Without action by the stockholders, any or all of the authorized shares may be issued by the corporation from time to time for such consideration as may be fixed by the Board of Directors of this corporation.

ARTICLE IV

INITIAL REGISTERED OFFICE AND AGENT

The initial registered office of this corporation in the State of Florida is 9309 Old Kings Road South, Suite 4, Jacksonville, Florida 32257. The name of the initial registered

FILED
00 DEC -5 PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Attachment
#P00000113139
D0033487

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

January 10, 2001

NATIONAL MEDICAL PRODUCTS COMPANY
9612 SUNBEAM CENTER DRIVE
JACKSONVILLE, FL 32257

Subject: **NATIONAL MEDICAL PRODUCTS COMPANY**

REGISTRATION NUMBER: **G01010900122**

This will acknowledge the filing of the above fictitious name registration which was registered on January 10, 2001. This registration gives no rights to ownership of the name.

Each fictitious name registration must be renewed every five years between January 1 and December 31 of the expiration year to maintain registration. Three months prior to the expiration date a statement of renewal will be mailed.

IT IS THE RESPONSIBILITY OF THE BUSINESS TO NOTIFY THIS OFFICE IN WRITING IF THEIR MAILING ADDRESS CHANGES. Whenever corresponding please provide assigned Registration Number.

Should you have any questions regarding this matter you may contact our office at (850) 488-9000.

/pm
Division of Corporations

Letter No. 201A00001410