

P01000074627

LAZARUS CORPORATE FILING SERVICE

(Requestor's Name)

3320 S.W. 87 AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip)

(Phone #)

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

400004506534--5

-07/30/01--01019--008

*****78.75 *****78.75

OFFICE USE ONLY

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

1. TOLEDOS CALVO HORTOPEDY & (Document #)

2. MEDICAL SUPPLY INC. (Document #)

3. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2.00

☒ 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/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

RECEIVED
01 JUL 30 AM 10:45
DIVISION OF CORPORATION

FILED
01 JUL 30 PM 12:49
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Examiner's Initials

ARTICLES OF INCORPORATION
OF

TOLEDOS CALVO HORTOPEDY & MEDICAL SUPPLY INC.

FILED
01 JUL 30 PM 12:49
SECRETARY OF STATE
TALLAHASSEE FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation shall be:

TOLEDOS CALVO HORTOPEDY & MEDICAL SUPPLY INC.

ARTICLE II: PRINCIPAL OFFICE

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

1085 E 4th AVE SUITE A HIALEAH FL. 33010

ARTICLE III: CAPITAL STOCK

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

100 SHARES OF \$5.00 EACH (\$500.00)

ARTICLE IV: INITIAL REGISTERED AGENT & ADDRESS

The name and address of the initial registered agent is:

MEDESTO A. PEREZ 180 ROYAL PALM RD # 110 HIALEAH FL. 33016

ARTICLE V: INCORPORATOR(S)

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


MODESTO A. PEREZ 180 ROYAL PALM RD # 110 HIALEAH GARDENS FL. 33016

ARTICLE VI: DIRECTOR(S)

The name(s) of the director (s) in this corporation is (are):

MODESTO A. PEREZ - PRESIDENT-D
180 ROYAL PALM RD # 110
HIALEAH GARDENS FL. 33016

The undersigned has (have) executed these Articles of Incorporation
this 26 Days of July. 2001.



Signature/Title

Signature/Title

Signature/Title

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: _____

TOLEDOS CALVO HORTOPEDY & MEDICAL SUPPLY INC.

2. The name and address of the registered agents and office is:

MODESTO A. PEREZ
180 ROYAL PALM RD # 110
HIALEAH GARDENS FL.33016

SIGNED: X
(Corporate Officer)

TITLE: _____

DATE: _____

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 AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE: X

DATE: _____

REGISTERED AGENT FILING FEE: \$20.00

FILED
01 JUL 30 PM 12:49
SECRETARY OF STATE
TALLAHASSEE FLORIDA