P02000076295

# TRANSMITTAL LETTER

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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 FEB -8 AM 9:01

**SUBJECT:** Dia-MedicsDirect, Inc
**(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)**

700004895907--9
-02/08/02--01025--004
*****87.50 *****87.50

Enclosed are 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: Claudette Lavoie
Name (Printed or typed)

P.O. Box 5026
Address

Ft. Lauderdale, FL 33310-5026
City, State & Zip

954-914-5356
Daytime Telephone number

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

bc
2/13

# 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:

Dia-Medics Direct, Inc.

***ARTICLE II PRINCIPAL OFFICE***

The principal place of business/mailing address is:

Place of Business
2504 NW 54th Street
Tamarac, FL 33309

Mailing Address:
P.O. Box 50260
Ft. Lauderdale, FL
33310-5026

***ARTICLE III PURPOSE***

The purpose for which the corporation is organized is:

Mail-Order Medical Supplies

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***ARTICLE IV SHARES***

The number of shares of stock is:

1,000

***ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)***

The name(s), address(es) and title(s):

Claudette Lavoie, 2504 NW 54th Street, Tamarac, FL 33309. President

Jimmy A. Lavoie, 2504 NW 54th Street, Tamarac, FL 33309. V. President

***ARTICLE VI REGISTERED AGENT***

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

Jimmy A. Lavoie, 2504 NW 54th Street, Tamarac, FL 33309

***ARTICLE VII INCORPORATOR***

The **name and address** of the Incorporator is:

Claudette Lavoie. 2504 NW 54th Street. Tamarac, FL 33309

**********

***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***

Jimmy Lavoie
Signature/Registered Agent Jimmy A. Lavoie

2/5/02
Date

Claudette Lavoie
Signature/Incorporator Claudette Lavoie

2/5/02
Date