

# PO2000039153

## TRANSMITTAL LETTER

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

000005193360--4  
-04/04/02--01074--007  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: MEDICAL Supplies and Equipment, Inc  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate

☒ ~~\$122.50~~ <sup>78.75</sup>  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FROM:

Ami Goodfrey  
Name (printed or typed)

6142 MIRAMAR PARKWAY Ste C  
Address

MIRAMAR, FL 33023  
City, State & Zip

(954) 894-2122  
Daytime Telephone number

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

gr 4/11

FILED  
02 APR -4 AM 10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLES OF INCORPORATION

*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:

MEDICAL Supplies and Equipment, Inc.

FILED  
02 APR -4 AM 8:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### ARTICLE II PRINCIPAL OFFICE

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

6142 MIRAMAR PARKWAY STE C  
MIRAMAR, FL, 33023

### ARTICLE III SHARES

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

100 shares @ \$1.00 per share

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

AMI GODFREY  
6142 MIRAMAR PARKWAY STE C  
MIRAMAR, FL, 33023

**ARTICLE V INCORPORATOR(S)**

**See instructions for officers/directors**

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

Ami Godfrey, Director / PRESIDENT  
6142 MIRAMAR PARKWAY STE C  
MIRAMAR, FL 33023

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

3rd day of April, 2007.

Ami Godfrey  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

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

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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: MEDICAL Supplies And Equipment, Inc

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

AMI Godfrey  
(NAME)

6142 MIRAMAR PARKWAY  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

MIRAMAR FL 33023  
(CITY/STATE/ZIP)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Having been named as registered agent and to accept service of process for the above stated 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.*

Ami Godfrey  
(SIGNATURE)

4/3/02  
(DATE)