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# PO2000042267

## LARUS CORPORATE FILING SERVICE

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MIAMI, FLORIDA (305)552-5973

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

300005307159--4

-04/19/02--01020--001  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

OFFICE USE ONLY

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

1. MODERN MEDICAL SUPPLIES, INC.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (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 checked="" type="checkbox"/>	Foreign
<input checked="" type="checkbox"/>	Limited Partnership
<input checked="" type="checkbox"/>	Reinstatement
<input checked="" type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

DIVISION OF CORPORATION

02 APR 19 AM 7:53

02 APR 19 AM 8:33  
TALLAHASSEE FLORIDA  
SECRETARY OF STATE

FILED

Examiner's Initials

## **ARTICLES OF INCORPORATION**

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

### **ARTICLE I NAME**

The name of the corporation shall be: Modern Medical Supplies, Inc.  
The principal place of business of this corporation shall be:  
6611 SW 41ct., Davie, FL 33314

### **ARTICLE II NATURE OF BUSINESS**

This corporation may engage in or transact any or all lawful activities or business  
Permitted under the laws of the United States, the State of Florida, or any other  
State, country, territory or nation.

### **ARTICLE III CAPITAL STOCK**

The aggregate number of shares of stock and its value that this corporation is authorized  
To have outstanding at any one time is : 100 shares, \$ 1.00 par value.

### **ARTICLE IV TERM OF EXISTENCE**

This corporation is to exist perpetually.

### **ARTICLE V OFFICERS DIRECTORS**

The name (s) and street address (es) of the initial officer (s) and director (s)  
If any, who shall hold office the first year of the corporation's existence or  
Until their successor (s) is (are) elected, is (are):

PRESIDENT / VICEPRESIDENT/ TREASURER

Ritchie Sandoval

6611 SW 41ct.

Davie, FL 33314

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

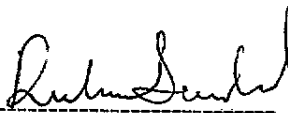
**ARTICLE VI INCORPORATOR(S)**

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

Ritchie Sandoval  
6611 SW 41ct.  
Davie, FL 33314

IN WITNESS WHEREOF, the undersigned incorporator(s) has) have)  
Executed these Articles of incorporation this, 16<sup>th</sup> DAY OF April 2002

Signature (s) of Incorporator (s)-----

A handwritten signature in black ink, appearing to read "Ritchie Sandoval", is written over a horizontal dashed line.

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**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 :  
Modern Medical Supplies, INC.

2-the name and address of the registered agent and office is:

Ritchie Sandoval  
6611 SW 41ct.  
Davie, FL 33314  
CITY / STATE / ZIP

Signature Ritchie Sandoval 4/17/02 Title \_\_\_\_\_  
Date 04-15-2002

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE  
STATED CORPORATION, AT THE PLACE DESIGNATE 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 Ritchie Sandoval Date 04-15-2002

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