

# P02000114173

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)205-0381

From: Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305)599-0839  
Fax Number : (305)716-0346

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**FLORIDA PROFIT CORPORATION OR P.A.**  
**AA MEDICAL SUPPLIES & EQUIPMENT, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

*[Handwritten signature]*  
10/23

ARTICLE OF INCORPORATION

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, do hereby adopt the following articles of incorporation:

ARTICLE ONE

The name of the corporation is AA MEDICAL SUPPLIES & EQUIPMENT, INC.

ARTICLE TWO

The duration of the corporation is perpetual.

ARTICLE THREE

The general purpose for which the corporation is organized are:

- 1.- To engage in the business of retail and wholesales medical supplies and equipment.
- 2.- To transact any other lawful business for which corporations may be incorporated under the Florida General Corporation Act.
- 3.- To do such other things as are incidental to the foregoing or necessary or desirable in order to accomplish the foregoing.

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TALLAHASSEE FLORIDA

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ARTICLE FOUR

The aggregate number of shares which the corporation is authorized to issue is 100. Such shares shall be of a single class, and shall be \$5.00 par value.

ARTICLE FIVE

The corporation is authorized to issue only one class of stock, and all issued stock shall be held of record by not more than ten persons. Stock shall be issued and transferable only to natural persons.

ARTICLE SIX

No stockholder shall have the right to sell, assign, pledge, transfer, devise, or otherwise dispose of any of the shares of the corporation without first offering such shares for sale to the corporation at the net asset value thereof.

ARTICLE SEVEN

The street address of the initial business office of the corporation is 381 NW 59th Court; Miami, Florida 33126

and the name of its initial registered agent is  
Aday Rodriguez.

ARTICLE EIGHT

The number of directors constituting the initial board of directors of the corporation is two . The name and address of each person who is to serve as a member of the initial board of directors is:

NAME	ADDRESS
Alexander Juan Garces (50%)	381 NW 59th Court Miami, FL 33126
Aday Rodriguez (50%)	159 West 43rd Street Hialeah, FL 33012

ARTICLE NINE

A unanimous vote of directors for effective directors action is required at all directors meetings.

ARTICLE TEN

The name and address of each incorporator is:

NAME	ADDRESS
Aday Rodriguez	159 West 43rd Street Hialeah, FL 33012

Executed by the undersigned at MIAMI, FLORIDA  
on October 22, 19 2002.

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CERTIFICATE DESIGNATING (OR CHANGING) PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THE STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 607.34 Florida Statutes, the following is submitted, in compliance with said Act:

First-That AA MEDICAL SUPPLIES & EQUIPMENT, INC  
(NAME OF CORPORATION)

desiring to organize under the laws of the State of FLORIDA  
(FLORIDA)

with its principal office, as indicated in the articles of incorporation at City of MIAMI county  
(CITY)

of DADE State of FLORIDA  
(COUNTRY) (STATE)

has named ADAY RODRIGUEZ  
(NAME OF RESIDENT AGENT)

located at 159 West 43rd Street; Hialeah, FL 33012  
(STREET ADDRESS AND NUMBER OF BUILDING,  
POST OFFICE BOX ADDRESS NOT ACCEPTABLE)

city of FLORIDA County of DADE  
(CITY) (COUNTRY)

State of Florida, as its agent to accept service of process within this state.

ACKNOWLEDGEMENT: (MUST BE SIGNED BY DESIGNATED AGENT)

Having been named to accept service of process for the above stated corporation, at place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

BY [Signature]  
SIGNATURE  
REGISTERED AGENT  
AND  
INCORPORATOR

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