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DIVISION OF CORPORATION

02 DEC 20 PM 4: 01

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 DEC 20 PM 12: 53

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2002/12/23

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LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

OFFICE USE ONLY

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

1. ALIANET MEDICAL SUPPLIES CORP.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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☐ 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

Examiner's Initials

ARTICLES OF INCORPORATION

FILED
02 DEC 20 PM 12:53
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;

ALIANET MEDICAL SUPPLIES CORP.

ARTICLE II PRINCIPAL OFFICE

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

ALIANET MEDICAL SUPPLIES CORP.
1305 W 26 Place # 205
HIALEAH FLORIDA 33010

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is; 500 shares values of \$1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS.

The name and address of the initial registered agent is;

ALEXANDER ACOSTA
1305 W 26 Place # 205
HIALEAH FL. 33010



ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) if the incorporator(s) to these Article of incorporation is (are);


ALEXANDER ACOSTA 1305 W 26 Place # 205
HIALEAH FLORIDA 33010

ARTICLE VI DIRECTOR(S)

The name(s) and the street address(es) of the director(s) to these Articles of incorporation is (are);

ALEXANDER ACOSTA 1305 W 26 Place # 205
HIALEAH FLORIDA 33010

The undersigned incorporator(s) has(have) executed these Articles of incorporation this 18 day of december, 2002



SIGNATURE

PRESIDENT, VICEPRESIDENT
TREASURER, SECRETARY

ALEXANDER ACOSTA

1305 W 26 Place # 205
HIALEAH FL 33010

SIGNATURE

SIGNATURE

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CERTIFICATE OF DESIGNATION REGISTERED AGENT / SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTERED OFFICE.

Pursuan to the provision of sections 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; _____

ALIANET MEDICAL SUPPLIES CORP

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

ALEXANDER ACOSTA

NAME

1305 W 26 Place # 205

P.O. BOX NOT ACCEPTABLE

HIALEAH FLORIDA 33010

CITY/STATE/ZIP

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATON 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 ABLIGATIONS OF MY POSITION AS REG

/
SIGNATURE

18 day of december, 2002