

P03000137 564

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

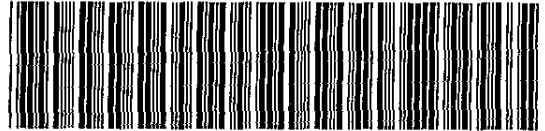
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

✓ D. WHITE NOV 21 2003

Office Use Only



500024276025

11/21/03--01063--013 **78.75

RECEIVED
03 NOV 21 PM 12:48
TALLAHASSEE FLORIDA

FILED
03 NOV 21 PM 3:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA

OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

OFFICE USE ONLY

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

1. ROYAL QUALITY MEDICAL EQUIPMENT, 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 type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

ROYAL QUALITY MEDICAL EQUIPMENT, INC.

FILED

03 NOV 21 PM 3:47

ARTICLES OF INCORPORATION
OF

1-
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ROYAL QUALITY MEDICAL EQUIPMENT, INC.

THE UNDERSIGNED INCORPORATOR(S), FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA GENERAL CORPORATION ACT, HEREBY ADOPT(S) THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE I -NAME

THE NAME OF THE CORPORATION SHALL BE :

ROYAL QUALITY MEDICAL EQUIPMENT, INC.

THE PRINCIPAL PLACE OF BUSINESS OF THIS CORPORATION SHALL BE

215 SW 17TH AVE STE 304, MIAMI, FLORIDA 33135

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 :500 all of which shall be common shares (1.00 PER VALUE EACH.)

Gloria Castillo & Ass. Inc
5610 S W 93 Th. Ave
Miami, Fl 33173

ROYAL QUALITY MEDICAL EQUIPMENT, INC.

-2-

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
SUCCESOR(S) IS (ARE) ELECTED IS (ARE)

MARLENE MUGICA
PRESIDENT/SECRETARY

12525 SW 9TH TERRACE
MIAMI , FL 33184-0000

ARTICLE VI INCORPORATOR (S)

THE NAME (S) AND STREET ADDRESS (ES) OF THE INCORPORATOR(S)
TO THIS ARTICLES OF INCORPORATION IS (ARE):

MARLENE MUGICA
PRESIDENT/SECRETARY

12525 SW 9TH TERRACE
MIAMI , FL 33184-0000

Gloria Castillo & Ass. Inc
5610 S W 93 Th. Ave
Miami , Fl 33173

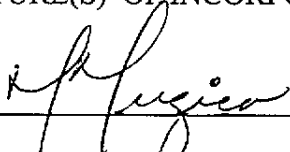
ROYAL QUALITY MEDICAL EQUIPMENT, INC.

-3-

CONTINUATION __ARTICLE VI-INCORPORATOR(S)

IN WITNESS WHEREOF, THE UNDERSIGNED INCORPORATOR (S)
HAS (HAVE) EXECUTED THESE ARTICLES OF INCORPORATION
THIS first (19) DAY(S) OF NOV. , 2003 .

SIGNATURE(S) OF INCORPORATOR(S)

A handwritten signature in cursive script, appearing to read "Marlene Mugica", is written over a horizontal line.

MARLENE MUGICA - PRESIDENT-/SECRETARY

GLORIA CASTILLO & ASS.INC

ROYAL QUALITY MEDICAL EQUIPMENT, INC.

-4-

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 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 :

ROYAL QUALITY MEDICAL EQUIPMENT, INC.

2.- THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE
IS :

MARLENE MUGICA

12525 SW 9TH TERRACE

(P.O. BOX NOT ACCEPTABLE)

MIAMI, FLORIDA 33184-000

(CITY /STATE /ZIPCODE)

SIGNATURE x *Marlene Mugica*

TITLE PRESIDENT

DATE 11/19/2003

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR
THE ABOVE STATED CORPORATION, AT THE PLACE DISGNATED
IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITI AND
FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF MY
RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY
DUTIES , AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION
607.325 , FLORIDA STATUTES .

SIGNATURE x *Marlene Mugica*

DATE 11/19/2003

GLORIA CASTILLO & ASS.INC

FILED
03 NOV 21 PM 3:48
SECRETARY OF STATE
TALLAHASSEE FLORIDA