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2005 JAN 20 P 4: 26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01/20/05--01014--016 **78.75

TRANSMITTAL LETTER

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

SUBJECT: Ally Diabetic Supplies, Inc.
(Proposed corporate name-must include suffix)

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

COST
\$78.75

**Filing Fee
& Certificate**

From: Lesly Chirinos

19501 Sterling Drive
Address

Miami, FL 33157
City, State, Zip

(305) 942-7570
Daytime Telephone Number

ARTICLES OF INCORPORATION

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The undersigned incorporator (s), for the purpose of forming a corporation under the Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

2005 JAN 20 P 4: 26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - NAME

The name of the corporation shall be:

Ally Diabetic Supplies, Inc.

ARTICLE II PRINCIPAL OFFICE

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

19501 Sterling Drive
Miami, FL 33157

ARTICLE III - SHARES

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

The maximum number of shares that this corporation is authorized to have outstanding at any time is FIVE HUNDRED (500) of common stock, each share having the par value of ONE DOLLAR (\$1.00).

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Lesly Chirinos
19501 Sterling Drive
Miami, FL 33157

ARTICLE V - INCORPORATORS(S)
See instructions for officers/directors

The names(s) and street address of the incorporators is (are):

President
Lesly Chirinos
19501 Sterling Drive
Miami, FL 33157

Vice President
Yimy Chirinos
19501 Sterling Drive
Miami, FL 33157

The undersigned incorporator(s) has (have) executed these articles of incorporation this
14th day of January, 2005.

(An additional article must be added if an effective date is requested.)



Signature



Signature

Signature

Signature

Notarization is not required

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**

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2005 JAN 20 P 4:26

PURSUANT TO THE PROVISIONS OF 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 corporation is:

Ally Diabetic Supplies, Inc.

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

Lesly Chirinos
19501 Sterling Drive
Miami, FL 33157

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.


(SIGNATURE)

16 JAN 05
(DATE)