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| PICK-UP WAIT MAIL                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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# LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

| MIAMI, FL 33165 (305) 552-5                                              | 6973                                                                    |                                       |
|--------------------------------------------------------------------------|-------------------------------------------------------------------------|---------------------------------------|
|                                                                          | <u></u>                                                                 | Office Use Only                       |
| CORPORATION NAME(S) & DOCUM                                              | MENT NUMBER(S),                                                         | (if known):                           |
| 1. A & L MEDICALS<br>(Corporation Name)                                  | SUPPLY ((Decument #)                                                    | ISAJ, INC.                            |
| 2. (Corporation Name)                                                    | (Document #)                                                            |                                       |
| 3. (Corporation Name)                                                    | (Document #)                                                            |                                       |
| 4(Corporation Name)                                                      | (Document #)                                                            | •                                     |
| Walk in Pick up time Mail out Will wait                                  | 2-06 Photocopy                                                          | Certified Copy  Certificate of Status |
| NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other | AMENDMENTS  Amendment Resignation of Change of Reg Dissolution/W Merger |                                       |
| OTHER FILINGS  Annual Report Fictitious Name                             | REGISTRATION  Foreign Limited Partner Reinstatement Trademark Other     | -                                     |
|                                                                          |                                                                         | Examiner's Initials                   |

CR2E031(7/97)

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# ARTICLES OF INCORPORATION

OF

A&L MEDICAL SUPPLY (USA), Inc.

#### ARTICLE I

THE NAME OF THE CORPORATION IS:

A&LMEDICAL SUPPLY (USA), Inc.

#### ARTICLE II

THE CORPORATION MAY ENGAGE IN ANY ACTIVITY OF BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND UNDER THE LAWS OF STATE OF FLORIDA.

#### ARTICLE III

THE MAXIMUN NUMBER OF SHARES OF CAPITAL STOCK THAT THE CORPORATION IS AUTHORIZED TO ISSUES IS 500 SHARES AT \$ 1.00 PER VALUE.

#### ARTICLE IV

THE AMOUNT OF CAPITAL WITH WHICH THE CORPORATION WILL BEGIN BUSINESS IS THE SUM OF \$ 500.00

# ARTICLE V

THE CORPORATION SHALL HAVE PERPETUAL EXISTENCE UNLESS SOONER DISSOLVED ACCORDING TO LAW, AND ITS EXISTENCE SHALL COMMEMCE UPON FILING.

#### ARTICLE VI

THE STREET ADDRESS IS THE PRINCIPAL OFFICE OF THE CORPORATION IN THIS STATE SHALL BE:

1799 NE 164th STREET, SUITE # 105, NORTH MIAMI BEACH, FLORIDA 33162

#### ARTICLE VII

THE NAME (S) AND STREET ADDRESS (ES) OF THE PERSON SIGNING THESE ARTICLES ARE:

Angel L. Hernandez – 1799 NE 164th STREET, SUITE # 105, NORTH MIAMI BEACH, FLORIDA 33162

#### ARTICLE VIII

THE CORPORATION SHALL HAVE A BOARD OF DIRECTORS CONSISTING OF NOT LESS THAN ONE OR MORE THAN SIX DIRECTORS. THE INICIAL BOARD OF DIRECTORS SHALL CONSIST OF ONE DIRECTOR WHOSE NAME AND ADDRESS ARE AS FOLLOWS:

Angel L. Hernandez - 1799 NE 164th STREET, SUITE # 105, NORTH MIAMI BEACH, FLORIDA 33162

#### ARTICLE IX

THE STREET ADDRESS OF INICIAL REGISTERED OFFICE AND THE NAME OF INICIAL REGISTERED AGENT AT THAT ADDRESS SHALL BE:

Angel L. Hernandez - 1799 NE 164th STREET, SUITE # 105, NORTH MIAMI BEACH, FLORIDA 33162

THE UNDERSIGNED HAS (HAVE) EXECUTED THESE ARTICLES OF INCORPORATION THIS SECOND DAYS OF JANUARY OF 2006.

Angel L. Hernandez PRESIDENT

SIGNATURE

#### CERTIFICATE OF DESIGNATION

# REGISTERED AGENT/REGISTERED OFFICE

Pursuant to provision of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of The State of Florida, submits the following statement in designated the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:

### A & L MEDICAL SUPPLY, INC

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

1799 NE 164th STREET, SUITE # 105, NORTH MIAMI BEACH, FLORIDA 33162

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.

DATE: JANUARY 02, 2006