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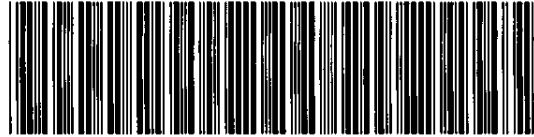
(Business Entity Name)

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07 JAN 16 PM 1:54
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CORPORATE FILING SERVICE**

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

1. Q & J MEDICAL EQUIPMENT INC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

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NEW FILINGS

- ☒ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 12, 2007

LAZARUS

SUBJECT: O & J MEDICAL EQUIPMENT INC
Ref. Number: W07000001904

We have received your document for O & J MEDICAL EQUIPMENT INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring
Document Specialist
New Filing Section

Letter Number: 407A00002826

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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CERTIFICATE OF INCORPORATION
OF

O & O MEDICAL EQUIPMENT INC

We, the undersigned, hereby associate ourselves together for the purpose of becoming a corporation under the laws of the State of Florida, by and under the provisions of the State of Florida providing for the formation, liability, right, privileges and immunities of a profit corporation

ARTICLE I – NAME

The name of the corporation shall be:

O & O MEDICAL EQUIPMENT INC

ARTICLE II – PRINCIPAL OFFICE

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

**175 FONTAINEBLEAU BLVD. SUITE 2 G 3
MIAMI, FL 33172
(786) 308 0336**

ARTICLE III – PURPOSE

The corporation shall have perpetual existence and may engage in any and all business permitted under the laws of the state of Florida and the United States.

ARTICLE IV – CAPITAL STOCK

This corporation is authorized to issue 100 shares of One Dollar (\$ 1.00) par value common stock

ARTICLE V – PREEMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new common stock of this corporation, shall have the right to purchase his pro-rata share (as nearly as many be done without issuance of fractional share) at the price at which it is offered to others.

ARTICLE VI – INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

OXIDES ORTIZ
175 FONTAINEBLEAU BLVD. STE. 2 G 3
MIAMI, FL 33172
(786) 308 0336

ARTICLE VII – BOARD OF DIRECTORS

This corporation shall have **ONE** director initially. The number of directors may be either increased or diminished from time to time by the by-laws, but shall never be less than one(1). The initial director of this corporation is:

OXIDES ORTIZ
PRESIDENT/DIRECTOR

ARTICLE VIII – INCORPORATOR

The name and street of the incorporator to these article is:

OXIDES ORTIZ
175 FONTAINEBLEAU BLVD. SUITE 2 G 3
MIAMI, FL 33172

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ARTICLE IX – INDEMNIFICATION

The corporation shall indemnify any officer or directors, or any former officers or directors to the extent permitted by law.

ARTICLE X – BY LAWS

The power to adopt, alter, amend or repeal the by-laws shall be vested in the Board of Directors and the shareholders. In witness whereof, the undersigned incorporator has executed these articles of incorporation this **January 9, 2007**

CERTIFICATE DESIGNATING THE ADDRESS AND AN AGENT UPON WHOM PROCESS MAY BE SERVED

WITNESSED;

That **O & O MEDICAL EQUIPMENT INC** is desiring to organize under the laws of the state of Florida has appointed **OXIDES ORTIZ** of **175 FONTAINEBLEAU BLVD. STE 2 G-3. MIAMI. FL 33172** as its Registered agent to accept service of process within the state.

ACKNOWLEDGMENT:

Having been named by the first Board of Directors of **O. & O. MEDICAL EQUIPMENT INC** to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and agree to comply with the applicable provisions of the state of Florida Statutes, this **January 9, 2007**.

X Oxides Ortiz

REGISTERED AGENT
INCORPORATOR