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To: Division of Corporations
Fax Number : (850) 205-0381

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION

ADVANCE FLORIDA MEDICAL SUPPLIES INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
ADVANCE FLORIDA MEDICAL SUPPLIES 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:
ADVANCE FLORIDA MEDICAL SUPPLIES INC.
THE PRINCIPAL PLACE OF BUSINESS OF THIS CORPORATION SHALL BE:
2400 NW 167 STREET, MIAMI, FLORIDA, 33054**

ARTICLE II NATURE OF BUSINESS

THIS CORPORATION MAY ENGAGE IN OR TRANSACT ANY OR ALL LAWFULL ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES, THE STATE OF FLORIDA, OR ANY OTHER STATE, COUNTY, 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.**
1000 SHARES AT \$1.00 EACH

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 SUCCESSOR(S) IS (ARE) ELECTED, IS (ARE)

***LIVIO A. MARTINEZ (PRES/SEC/TREA)**
2400 NW 167 STREET
MIAMI, FL. 33054

ARTICLES VI INCORPORATOR(S)

**THE NAME(S) AND STREET ADDRESS(ES) OF THE
INCORPORATOR(S) TO THIS ARTICLES OF INCORPORATOR(S)**

- **LIVIO A. MARTINEZ
2400 NW 167 STREET
MIAMI, FL. 33054**

**IN WITNESS WHEREOF, THE UNDERSIGNED INCORPORATOR(S)
HAS (HAVE) EXECUTED THESE ARTICLES OF INCORPORATION
THIS: JANUARY 26TH, OF THE YEAR 2007**

SIGNATURE(S) OF INCORPORATOR(S)



LIVIO A. MARTINEZ

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TALLAHASSEE, FLORIDA

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 THE STATE OF FLORIDA, SUBMITS THE
FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA
THE NAME OF THE CORPORATION:**

ADVANCE FLORIDA MEDICAL SUPPLIES INC.

**THE NAME AND ADDRESS OF THE REGISTERED AGENT AND
OFFICE IS:**

**LIVIO A. MARTINEZ
2400 NW 167 STREET
MIAMI, FL. 33054**

TITLE:


**LIVIO A. MARTINEZ
PRESIDENT**

DATE: JANUARY 26TH, 2007

**HAVING BEEN NAMED 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 I FURTHER AGREE TO COMPLY WITH
THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER
AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT
THE DUTIES AND OBLIGATIONS OF SECTIONS OF SECTION
607.325, FLORIDA STATUTE**

SIGNATURE


LIVIO A. MARTINEZ

DATE: JANUARY 26TH, 2007