

P08000065235

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JUL -7 PM 2:24

W08000029555

EP 7/9/08



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
08 JUN 26 AM 8:00
DIVISION OF CORPORATIONS

June 18, 2008

ISABEL CARDENAS
230 E. YALE ST.
ORLANDO, FL 32804

SUBJECT: ISACAR MEDICAL SUPPLY, LLC
Ref. Number: W08000029555

We have received your document for ISACAR MEDICAL SUPPLY and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

Please return the corrected 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) 245-6062.

Eula Peterson
Regulatory Specialist II
New Filing Section

Letter Number: 908A00037164



RECEIVED

08 JUL -7 AM 8:00

FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 27, 2008

ISABEL CARDENAS
230 E. YALE ST.
ORLANDO, FL 32804

SUBJECT: ISACAR MEDICAL SUPPLY
Ref. Number: W08000029555

We have received your document for ISACAR MEDICAL SUPPLY and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

You have submitted the document and fees to form a Florida corporation; however, your name implies you wish to form a limited liability company. The name of a corporation cannot contain a limited liability company suffix. Limited Liability Company, Ltd. Liability Co., and L.L.C. are all limited liability company suffixes. The name of a corporation must contain Corporation, Corp., Incorporated, Inc., Company or Co.

Please correct the suffix or, if you wish to form a limited liability company, submit "Articles of Organization" along with the additional fee(s). Any fees previously submitted with your corporate filing will be applied to your limited liability company filing.

If you have any further questions concerning your document, please call (850) 245-6062.

Eula Peterson
Regulatory Specialist II
New Filing Section

Letter Number: 908A00037164

COVER LETTER

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

SUBJECT: Isaac Medical Supply Corp
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Isabel Cardenas
Name (Printed or typed)

230- E. YALE ST
Address

Orlando FL 32804
City, State & Zip

"407" 756-9873
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Isa car
Medical supply Corp.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

230 - E - YALE ST
Orlando FL 32804

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Medical supply sales

ARTICLE IV SHARES

The number of shares of stock is:

One hundred

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Isabel cardenas
230 - E - YALE ST
Orlando FL 32804

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Isabel cardenas
230 - E - YALE ST
Orlando FL 32804

ARTICLE VII INCORPORATOR

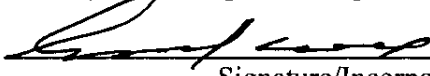
The name and address of the Incorporator is:

Isabel cardenas
230 - E - YALE ST
Orlando FL 32804

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent



Signature/Incorporator

7/3/05

Date

6/19/08

Date

FILED
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
08 JUL -7 PM 2:24