

PO9000028985

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

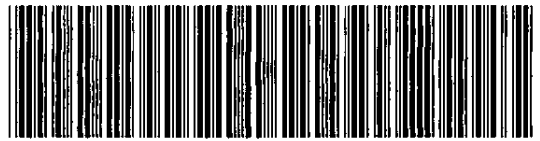
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
09 MAR 30 PM 3:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

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

**SUBJECT:** FLORIDA REGIONAL DME INC  
(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: JOHN D RHODEN  
Name (Printed or typed)

2841 N OAKLAND FOREST DR #202  
Address

OAKLAND PARK, FL 33309  
City, State & Zip

(954) 677-5321  
Daytime Telephone number

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

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09 MAR 30 PM 3: 31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:

FLORIDA REGIONAL DME INC

**ARTICLE II PRINCIPAL OFFICE**

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

2841 N OAKLAND FOREST DR #202  
OAKLAND PARK ,FL 33309

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is:  
1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

JOHN D RHODEN, PRESIDENT  
2841 N OAKLAND FOREST DR #202  
OAKLAND PARK, FL 33309

**ARTICLE VI REGISTERED AGENT**

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

JOHN D RHODEN  
2841 N OAKLAND FOREST DR #202  
OAKLAND PARK, FL 33309

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

JOHN D RHODEN  
2841 N OAKLAND FOREST DR #202  
OAKLAND PARK, FL 33309

\*\*\*\*\*

*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

3/26/09

Date

3/26/09

Date