### Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H100002439973)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICES IN

Account Number: I20000000146

Phone : (305) 444-4994

Fax Number : (305)444-4977

\*\*Enter the email address for this business entity to be used for Ertur annual report mailings. Enter only one email address please. \*\*

Email Address	3:		

### FLORIDA PROFIT/NON PROFIT CORPORATION ORIENTAL MEDICAL EQUIPMENT SUPPLIES, CORP.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

MRD11/10

# ARTICLES OF INCORPORATION OF ORIENTAL MEDICAL EQUIPMENT SUPPLIES, CORP.

The undersigned incorporator, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

#### ARTICLE I - NAME

The name and address of this corporation shall be:

ORIENTAL MEDICAL EQUIPMENT SUPPLIES, CORP. 6484 SW 166 COURT MIAMI, FL. 33193

#### ARTICLE II - EXISTANCE

The corporation shall have perpetual existence.

#### ARTICLE III - PURPOSE OF CORPORATION

The corporation may transact any or all lawful business for which corporations may be incorporated under the laws of the State of Florida and of the United States.

#### ARTICLE IV - CAPITAL STOCK

The aggregate number of shares which the corporation shall have authority to issue is 1,000 shares of common stock having \$ 1.00 par value.

#### ARTICLE V - PREEMPTIVE RIGHTS

Every shareholder, upon the sale for each of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his prorate share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

# ARTICLE VI - NAME OF REGISTERED AGENT AND ADDRESS OF REGISTERED OFFICE

The name and street address of the corporation's initial registered resident agent shall be:

ALBERTO MARQUEZ 6484 SW 166 COURT MIAMI, FL 33193

FILED

10 NOV -9 AM 10: 19

### ARTICLE VII - INITIAL BOARD OF DIRECTORS

SECRETARY OF STATE TALLAHASSEE FLORIDA

Initially this corporation shall have one director. 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. The name and address of the initial directors are:

ALEXIS BELLORIN
President/Director

5463 NW 72 AVE

SERGIO PEREZ

Miami, Fl. 33166

SERGIO PEREZ
Vice-President/Director

5463 NW 72 AVE Miami, FL 33166

ALBERTO MARQUEZ

5463 NW 72 AVE

Secretary/Director

2010.

Miami, FL 33166

#### ARTICLE VIII - INCORPORATOR

The name and address of the person signing these articles is:

ALBERTO MARQUEZ 5463 NW 72 AVE MIAMI, FL 33166

#### ARTICLE IX - BY LAWS

The power to adopt, after, amend or ropeal by-laws shall be vested in the Board of directors and shareholders.

#### ARTICLE X - AMENDMENT

The corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment thereto, and any right conferred upon the shareholders is subject to this reservation.

The undersigned has (have) executed these Articles of Incorporation this 8th day of November

D/S

FILED

10 NOV -9 AMIO: 19

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

SECRETARY OF STATE TALLAHASSEE FLORIDA

Pursuant to the provisions of Section 607.325, Florida Statues, 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.

1. The name of the corporation is:

ORIENTAL MEDICAL EQUIPMENT SUPPLIES, CORP.

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

ALBERTO MARQUEZ 6484 SW 166 COURT MIAMI, FL, 33193

Having been named to accept services of process for the above stated corporation, at the place designated in the certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statues relative to the proper and complete performance of my duties, and I accept the duties and obligations of Section 607.325, Florida Statues.

DATE: