

P15000010497

Florida Department of State
Division of Corporations
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To: Division of Corporations
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DIVISION OF CORPORATIONS
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORIDA PROFIT/NON PROFIT CORPORATION

Dade Cnty Medical Supply, Inc.

Please file this on the day that we fax 1/29/15

Certificate of Status	0
Certified Copy	1
Page Count	04
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88291

02/02/15

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1/30/15



January 30, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORP USA

SUBJECT: DADE MEDICAL SUPPLY, INC.
REF: W15000006917

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refile this document until the quality has been improved.

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The document number of the name conflict is P11000041209 (DADE MEDICAL SUPPLIES, CORP).

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) 245-6052.

Thomas Chang
Regulatory Specialist II
New Filing Section

FAX Aud. #: H15000024112
Letter Number: 015A00001937

P.O. BOX 6327 - Tallahassee, Florida 32314

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4

H15000004111

COVER LETTER

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

SUBJECT: Dade County Medical Supply, 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: Michael RAPP
Name (Printed or typed)

3344 WATER OAK DRIVE
Address

Hollywood, Florida 33021
City, State & Zip

786-312-0353
Daytime Telephone number

MRAPP32@YAHOO.COM
E-mail address: (to be used for future annual report notification)

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:

Dade County Medical Supply, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3344 water oak DRIVE
Hollywood, Florida 33021

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To Sell & distribute
Medical Supplies

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael Rapp, President and Name and Title: Secret.

Address 3344 water oak DRIVE Address:
Hollywood, Florida
33021

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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DIVISION OF CORPORATIONS

(cont.)

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Michael Rapp
Address: 3344 Water Oak Drive
Hollywood, Florida 33021

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Michael Rapp
Address: 3344 Water Oak Drive
Hollywood, Fla. 33021

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

Michael Rapp
Required Signature/Registered Agent

1/29/15
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.355, F.S.

Michael Rapp
Required Signature/Incorporator

1/29/15
Date

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01/30/2015 16:46 3056339696 211H000051H