

P95000016459

OFFICE USE ONLY (Document #)

LAZARUS CORPORATE INDUSTRIES, INC.

(Requestor's Name)

890 S.W. 87 AVENUE #16

(Address)

MIAMI, FLORIDA 33174 (305)552-5973

(City, State, Zip)

(Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

(904)385-6735

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. AMERICAN DURABLE MEDICAL EQUIPMENT
(Corporation Name) (Document #) SERVICE INC
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 9:00

☒ Certified Copy 300001420223
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****122.50 ****122.50

☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

KAN

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 28 PM 2:41

ARTICLES OF INCORPORATION OF

AMERICAN DURABLE MEDICAL EQUIPMENT SERVICE INC.

The undersigned, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and of those of the corporation, are to be determined in accordance with the laws of the State of Florida.

ARTICLE I

The name of this corporation shall be: _____

AMERICAN DURABLE MEDICAL EQUIPMENT SERVICE INC.

ARTICLE II

This corporation shall commence existence upon the filing of this Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purposes proposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- (1) Transact any and all lawful business.
- (2) Said corporation shall further have powers:

To have perpetual succession by its corporate name:

AMERICAN DURABLE MEDICAL EQUIPMENT SERVICE INC.

ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 100 shares, having an individual par value of \$ 1.00

Unless otherwise stated in these articles, or in an amendment to this articles, there shall be only one (1) class of stock of this corporation.

ARTICLE V

The street address of the initial principal office and the name of the initial Resident Agent of this corporation shall be:

CARLOS A. ASPIAZU

13072 SW 88 Ln. MIAMI FL. 33186

ARTICLE VI

The initial Board of Directors shall consist of THREE (3) persons, and the name and address of the person who is to serve as an initial director is:

Carlos A. Aspiazu

CARLOS A. ASPIAZU

PRESIDENT.

13072 SW 88 LN

MIAMI, FL 33186

Susana Soltero

SUSANA SOLTERO

SECRETARY.

13072 SW 88 LN

MIAMI, FL 33186

Guillermo L. Donadio

GUILLERMO L. DONADIO

TESORERO.

13072 SW 88 LN

MIAMI, FL 33186

The name and address of the incorporator executing these Articles of Incorporation is:

CARLOS A. ASPIAZU

13072 SW 88 Ln. MIAMI FL. 33186

IN WITNESS WHEREOF, the undersigned incorporator has (ve) executed these Articles of Incorporation this 26 day of FEBRUARY, 19 95.

Carlos Aspiazu
SS.

STATE OF FLORIDA)
COUNTY OF DADE) SS.

BEFORE ME, a notary public authorized to take acknowledgments in the state and county set forth above, personally appeared Carlos Aspiazu, known to me and known by me to be the person (s) who executed the foregoing Articles of Incorporation, and he (they) acknowledge before me that he (they) executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the state and county aforesaid. This 26 day of FEBRUARY, 199 5.

Guillermo L. Donadio
NOTARY PUBLIC, STATE OF FLORIDA AT LARGE



OFFICIAL SEAL
Guillermo L. Donadio
My Commission Expires
March 15, 1997
Comm. No. CC 268704

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of the section 607.0501 or 617.0501, 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.

1. The name of the corporation is: AMERICAN DURABLE MEDICAL
EQUIPMENT SERVICE INC.

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

CARLOS A. ASPIAZU

(NAME)

13072 SW 88 Ln. MIAMI FL. 33186

(P.O.BOX NOT ACCEPTABLE)

(CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. IN FURTHER AGREE TO COMPLY WITH THE PROVISIONS OFF ALL STATES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE *C. Aspiazu*

DATE 2-26-95

P95000016459

Eduardo Mendez

ATTORNEY AT LAW

220 W. FLAGLER ST.

SUITE 205

MIAMI, FLORIDA 33174

400001670094

-12/19/95--01060--001

*****70.00 *****35.00

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
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<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A. Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 DEC 18 AM 8:22

SH DEC 27 1995

Examiner's Initials

**ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF**

AMERICAN DURABLE MEDICAL EQUIPMENT SERVICE, INC.

(present name)

Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: *(indicate article number(s) being amended, added or deleted)*

ARTICLE VI.- The Board of Directors shall consist of one person.
The name and address of the person who is to serve
as Director is: JESUS DIAZ
1355 W. Okeechobee Rd
Hialeah, Florida 33010

ARTICLE: V.- The street address of the principal office and the
name of the Registered Agent shall be:
JESUS DIAZ
1355 W. Okeechobee Rd,
Hialeah, Florida 33010

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 DEC 18 AM 8:22

SECOND: If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

THIRD: The date of each amendment's adoption: December 1, 1995.

FOURTH: Adoption of Amendment(s) (check one)

☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval by _____."
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 4th day of December, 1995.

Signature 

(By the Chairman or Vice Chairman of the Board of Directors, President or other officer if adopted by the shareholders).

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

JESUS DIAZ

Typed or printed name

President

Title

P95000016459

EDUARDO MENDEZ
ATTORNEY AT LAW
10920 West Flagler Street
Suite 205
Miami, Florida 33174

Licensed in
Illinois
Florida

(305) 553-8676
Fax - (305) 553-3944

900001665359
-12/19/95--01060--001
*****70.00 *****70.00

December 12, 1995

Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

900001665359
-12/19/95--01060--001
*****70.00 *****35.00

Re: American Durable Equipment
Service, Inc.
#95000016459

Dear Sir/Madam.-

Please be advised that the undersigned is the attorney for the
above named corporation.

Enclosed please find:

- a) Change of Registered Agent
- b) Articles of Registered Agent
- c) Check for \$70.00 to cover expenses.
- d) Copies of same.

Kindly return to the undersigned duly stamped copies for the
corporate record book.

Yours Truly,


Eduardo Mendez, Esquire

SH DEC 27 1995

RA Charge

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
35 DEC 18 AM 8:16

EM/gm

Florida Department of State, Sandra B. Mortham, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: AMERICAN DURABLE MEDICAL EQUIPMENT
SERVICE, INC.

1b. The mailing address of the corporation is: 13072 S.W. 88 Lane, Miami, FL. 33186

1c. Date of incorporation: 02-28-95 Document number: P 95000016459

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

CARLOS A. ASPIAZU

13072 S.W. 88 Lane

Miami, Florida 33186

3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

JESUS DIAZ

1355 W. Okeechobee Rd

Hialeah, Florida 33010

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

X [Signature]
(Signature of an officer, chairman or
vice chairman of the board)

12-1-95
(Date)

JESUS DIAZ

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

X [Signature]
(Signature of Registered Agent)

12-1-95
(Date)

If signing on behalf of an entity: DIAZ

(Typed or Printed Name)

(Capacity)

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 DEC 18 AM 8:15

095000016459

LAZARUS CORPORATE INDUSTRIES, INC.
Requestor's Name

890 S.W. 87 AVENUE SUITE: 16
Address

MIAMI, FLORIDA 33174 (305)552-5973
City/State/Zip Phone #

LOCAL REPRESENTATIVE TALLAHASSEE

700001713937
-02/13/96--01108--016
*****35.00 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. AMERICAN DURABLE MEDICAL EQUIPMENT
(Corporation Name) (Document #)

2. SERVICE, INC.
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2:00

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
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<input type="checkbox"/>	Fictitious Name
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REGISTRATION QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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96 FEB 13 PM 3:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
96 FEB 13 AM 11:44
DIVISION OF CORPORATION

N. HENDRICKS FEB 13 1996

ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF

FILED
96 FEB 13 PM 3:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AMERICAN DURABLE MEDICAL EQUIPMENT SERVICE, INC.

(present name)

Pursuant to the provisions of section 607.1006, Florida Statutes, the undersigned corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted:

ARTICLE VI: The Board of Directors shall consist of one person.
The name and address of the person who is to serve
as Director/President is: JOSE M. RODRIGUEZ
1845 S.W. 16 Terrace
Miami, FL 33145

~~SECOND: If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:~~

ARTICLE V: The street address of the principal office and the name of
the Registered Agent shall be: JOSE M. RODRIGUEZ
1845 S.W. 16 Terrace, Miami, FL 33145
February 8, 1996

THIRD: The date of each amendment's adoption:

FOURTH: Adoption of Amendment(s) (check one)

- ☒ The amendment(s) was/were adopted by the incorporators or board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups.

[The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s).]

The number of votes cast for the amendment(s) was/were sufficient for approval by _____
(voting group)

(continued)

Signed this 8th day of FEBRUARY, 19, 96.

By 

(Chairman or Vice Chairman of the Board of Directors, President or other officer if adopted by the shareholders)

OR
(A director or incorporator if adopted by the directors or incorporators)

JOSE M. RODRIGUEZ

(Typed or printed name)

PRESIDENT/ INCORPORATOR

(Title)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS MY POSITION AS REGISTERED AGENT.

SIGNATURE 

DATE _____