

# P95000025002

## TRANSMITTAL LETTER

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

300001440353  
-03/27/95--01045--005  
\*\*\*122.50 \*\*\*122.50

SUBJECT: Better Health Medical Equipment and Supplies, Inc.  
(Proposed corporate name - must include suffix)

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

\$70.00  
Filing Fee

\$78.75  
Filing Fee  
& Certificate

\$122.50  
Filing Fee  
& Certified Copy

\$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FROM:

Jerry Diaz

Name (printed or typed)

9139 NW 152 Lane

Address

Miami, FL 33016

City, State & Zip

Daytime Telephone number

55 MAR 27 PM 12:32

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

*SDC*

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
55 MAR 27 PM 12:32

**ARTICLES OF INCORPORATION  
OF  
BETTER HEALTH MEDICAL EQUIPMENT AND SUPPLIES, INC.**

**WE THE UNDERSIGNED**, as proper persons acting as incorporators of a corporation under the laws of the State of Florida, adopt the following articles of incorporation.

**ARTICLE I NAME**

The name of the corporation shall be, Better Health Medical Equipment and Supplies, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporations shall be:

9139 N.W 152 Lane  
Miami, Florida 33016

**ARTICLE III SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 at a value of \$1.00 per share.

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name of the registered agent is:

Jerry Diaz  
9139 N.W. 152 Lane  
Miami, Florida 33016

**ARTICLE V INCORPORATORS**

The names and street addresses of the incorporators to these Articles of Incorporations are as follows:

<u>NAME</u>	<u>ADDRESS</u>
Jerry Diaz	9139 N.W. 152 Lane Miami, Fl 33016
Sonia Diaz	9139 N.W. 152 Lane Miami, Fl 33016

The undersigned incorporators have executed these Articles of Incorporation this 22nd day of March, 1995.

  
\_\_\_\_\_  
JERRY DIAZ

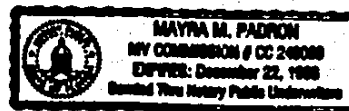
  
\_\_\_\_\_  
SONIA DIAZ

STATE OF FLORIDA )  
                          SS.  
COUNTY OF DADE)

**BEFORE ME**, the undersigned authority, this day personally appeared Jerry Diaz and Sonia Diaz personally known to me to be the persons who executed the foregoing Articles of Incorporation of Better Health Medical Equipment and Supplies, Inc., and severally acknowledged before me that they executed the same for the purposes of therein expressed.

Witness my hand and official seal at Hialeah, Dade County, Florida this 22nd day of March, 1995.

  
\_\_\_\_\_  
Notary Public State of Florida  
Mayra M. Padron



My commission expires : December 22, 1996


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

PURSUANT TO THE PROVISIONS OF 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 : BETTER HEALTH MEDICAL EQUIPMENT AND SUPPLIES, INC.
  
2. The name and address of the registered agent and office is:

JERRY DIAZ  
9139 N.W. 152 Lane  
Miami, Florida 33016

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. 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 OF MY POSITION AS REGISTERED AGENT.

  
\_\_\_\_\_  
JERRY DIAZ

3-22-95  
DATE

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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