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DIVISION OF CORPORATIONS

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OFFICE USE ONLY (Document #)

LAZARUS CORPORATE INDUSTRIES, INC.
 (Requester's Name)
 870 S.W. 87 AVENUE #16
 (Address)
 MIAMI, FLORIDA 33174 (305)552-5973
 (City, State, Zip) (Phone #)
 LOCAL REPRESENTATIVE TALLAHASSEE

OFFICE USE ONLY

(904)385-6736

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): 3010144-B233
 04/03/95--01074-018
 ****122.50 ****122.50

1. Gables medical Supplies Inc. (Corporation Name) (Document #)

2. _____ (Corporation Name) (Document #)

3. _____ (Corporation Name) (Document #)

4. _____ (Corporation Name) (Document #)

Walk in

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Certified Copy

Certificate of Status

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CC: CUSTODIAL

NEW FILINGS	
X	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/ QUALIFICATION	
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: Gables Medical Supplies Inc.

ARTICLE II PRINCIPAL OFFICE

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

12095 SW 18 fba #270.
MIAMI FL 33175.

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500.00 SHARES.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Lovedes YAVES.
12095 SW 18 fba #270.
MIAMI FL 33175.
S.S. 590-40-4823.

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

LURDES JAMES
Gables Medical Supplies Inc.
12095 SW 18 - 8a... 4270
Miami FL 33175.

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

28 day of September, 1992.

Lurdes James
Signature

Lurdes James
Signature

Lurdes James
Signature

**Articles of Incorporation
Filing Fee - \$35**

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:

Gables Medical Supplies Inc

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

Lourdes Yanes

(Name)

12093 SW 18 Ba 4970

(P.O. Box not acceptable)

Miami FL 33175

(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. 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.

K. James
(Signature)

03-28-95
(Date)