# P95000027051

LAZARUS CORPORATE INDUSTRIES, INC.

(Requestar's Names)

890 S.W. 87 AVENUE, SUITE:16

(Address)

MIAMI, FLORIDA 33174 (305)552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

(904)385-6735

400001450984 -04/07/95--01033--002 \*\*\*\*122.50 \*\*\*\*122.50

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

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			(Document #)	
<del></del>	(Corporation Name)		(Document #)	
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Walk in	Pick up time	2100	Certified Copy	
Mail out	Will wait	Photocopy	Certificate of Status	

NEW FILINGS		
$\sum$	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

Examiner's Initials (

95 APR -5 PM 2:44

# ARTICLES OF INCORPORATION

#### ARTICLE I. NAME

The name of this Corporation is RUBY MEDICAL EQUIPMENT, INC.

#### ARTICLE II. NATURE OF BUSINESS

RUBY MEDICAL EQUIPMENT, INC. is organized for the purpose of transacting any lawful business for which corporations may be formed in Florida.

# ARTICLE III. TERM OF EXISTENCE

The duration of RUBY MEDICAL EQUIPMENT. INC. is perpetual.

#### ARTICLE IV. CAPITAL STOCK

RUBY MEDICAL EQUIPMENT, INC. is authorized to issued 100 shares of common stock, par value \$1.00 per share.

#### ARTICLE V. ADDRESS

The Principle address of the initial registered office of <u>RUBY</u> <u>MEDICAL EQUIPMENT, INC.</u> is:

2970 W FLAGLER ST MIAMI, FL 33135

and the name of the initial registered agent of this corporation at this address is <a href="DOLORES RODRIGUEZ">DOLORES RODRIGUEZ</a>.

# ARTICLES VI. INITIAL DIRECTORS

RUBY MEDICAL FOULPMENT, INC. shall have one (1) director, and the number of directors may be changed as provided in the bylaws, but shall never be less than one. The name and address of the initial directors are:

DOLORES RODRIGUEZ 2970 W FLAGLER ST MIAMI, FL 33135

PRESIDENT/SECRETARY
DIRECTOR

# ARTICLE VII. INCORPORATORS

The name and addresses of the incorporator of this corporation are:

DOLORES RODRIGUEZ 2970 W FLAGLER ST MIAMI, FL 33135

IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation this  $\underline{15th}$  day of March  $\underline{1995}$ .

STATE OF FLORIDA )
COUNTY OF DADE )

DOLORES RODRIGUEZ

INCORPORATOR

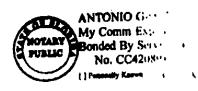
Before me, a notary public authorized take acknowledgements in the State and County seats above, personally appeared <u>DOLORES RODRIGUEZ</u>, known to me and known by me to be the persons who executed the foregoing Articles of Incorporation, and they acknowledged before me that they executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 15th day of March 1995.

NOTARY PUBLIC

STATE OF FLORIDA AT LARGE

My Commission Expires:





FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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#### ACCEPTANCE OF APPOINTMENT

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QE

#### REGISTERED AGENT

Pursuant to the provisions of section 607.0501, 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: RUBY MEDICAL EQUIPMENT, INC.
2. The name and address of the registered agent and office is:  DOLORES ROPRIGUEZ
2970 W FLAGLER ST
MIAMI, FL 33135
SIGNATURE Poleres Ro-Prique

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 MAY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MAY POSITION AS REGISTERED AGENT.

SIGNATURE Halanes Robigues,
DATE March 15, 1995