

P95000028853

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

(904) 385-6735

OFFICE USE ONLY

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 12 PM 2:54

ENCLOSURE 14506806
-04/14/95--010214-019
****122.50 ****122.50

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

1. d & a medical equipment inc
(Corporation Name) (Document #)
2. _____
(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	
☒	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

4-12
K/N

95 APR 12 PM 2:54

ARTICLES OF INCORPORATION
OF

I & A MEDICAL EQUIPMENT 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 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:

I & A MEDICAL EQUIPMENT INC.

ARTICLE II

This corporation shall commence existence upon the filing of these 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;

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 these articles, there shall be only one (1) class of stock of this corporation.

ARTICLE V

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

IDANIA UROQUIZA
1490 W 49 PLACE SUITE:391
HIALEAH, FLORIDA 33012

The Principal office shall be:

1490 W 49 PLACE SUITE:391
HIALEAH, FLORIDA 33012

ARTICLE VI

The initial Board of Directors shall consist of a total of two (2) person, and the name and address of the person who is to serve as an initial director is:

PRESIDENT: IDANIA URQUIZA 50%
1490 W 49 PLACE SUITE:391
HIALEAH, FLORIDA 33012

V. PRESIDENT: J. F. LEE 50%
19 PLACE SUITE:391
FLORIDA 33012

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

IDANIA URQUIZA

ALBERTO F. LEE

1490 W 49 PLACE
SUITE 391
HIALEAH, FL. 33012

IN WITNESS WHEREOF, the undersigned incorporator has
(ve) executed these Articles of Incorporation this 11 day
of APRIL, 1995.

Idania Urquiza
D.L.# U622-400-07-632-0

Alberto F. Lee
D.L.# L000-006-70-304-0

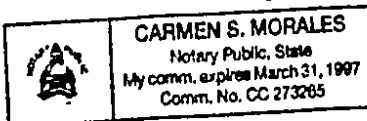
STATE OF FLORIDA }
COUNTY OF DADE } SS.

BEFORE ME, a notary public authorized to take acknow-
ledgements in the state and county set forth above, personally
appeared IDANIA URQUIZA & ALBERTO F. LEE 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 11 day of APRIL, 1995.

Carmen S. Morales
NOTARY PUBLIC, STATE OF FLORIDA
AT LARGE

My Commission Expires:



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

95 APR 12 PM 2:54

Pursuant to the provisions of sections 807.0501 or 817.0501, 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: I & A MEDICAL EQUIPMENT INC.

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

IDANIA UROQUIZA

(NAME)

1490 W 49 PLACE #391

(P.O. BOX NOT ACCEPTABLE)

HIACLEAH, FL. 33012

(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.

SIGNATURE *Idania Uroquiza*

DATE 4/11/95