

P95000029183

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 13 PM 2:20

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

1. CARE HOME EQUIPMENT CORP
(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	
<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

4-13
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR 13 PM 2:20

ARTICLES OF INCORPORATION

OF

CARE HOME EQUIPMENT CORP.

I, the undersigned, being desirous of forming a corporation under the Laws of the State of Florida, declare:

ARTICLE I

NAME

The name of this Corporation shall be:

CARE HOME EQUIPMENT CORP.

ARTICLE II

AUTHORIZED SHARES

The maximum number of shares which the corporation is authorized to issue and have outstanding at any time is 1000 shares of common stock, and which common stock shall have a par value of \$ 1 per share. All stock is to be issued fully paid and exempt from assessment.

ARTICLE III

TERM OF CORPORATE EXISTENCE

The date when corporate existence shall commence shall be upon the filing of these Articles with the Department of State. The corporation shall have perpetual existence unless dissolved according to law.

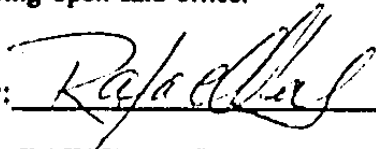
ARTICLE IV

REGISTERED OFFICE AND AGENT

In pursuance of Chapter 607.34 Florida Statutes, the following is submitted, in compliance with said Act:

First-That CARE HOME EQUIPMENT CORP. desiring to organize under the laws of the State Florida with its principal office as indicated in the articles of incorporation at City of Miami, County of Dade, State of Florida had name RAFAEL H. OTERO 1140 W. 50 ST. STE. 305-A, Hialeah, Florida, County of Dade, State of Florida, as its agent to accept service of process within this state.

Having been named to accept service of process for the above state corporation, at place designated in this certificate. I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

By: 
RAFAEL H. OTERO
Registered Agent

ARTICLE V

PRINCIPAL PLACE OF BUSINESS

The principal place of business and address is the following:

1140 W 50 ST. STE. 305-A

HIALEAH, FL. 33012

ARTICLES VI

DIRECTORS

The business of the corporation shall be managed by a Board of Directors. The number of directors of the corporation shall be no less than (1) nor more than seven (7), the exact number to be determined from time to time in accordance with the By-Laws and any Shareholders Agreement effect.

This corporation shall have two (2) Director(s) initially.

The name and address of the initial Directors of this Corporation is:

<u>NAME</u>		<u>ADDRESS</u>
RAFAEL H. OTERO	PRESIDENT	1140 W. 50 ST, STE 305-A HIALEAH, FLO 33012
EMILIA BATISTA	SEC/TREAS	1140 W. 50 ST. STE 305-A HIALEAH, FLO 33012

ARTICLES VII

INCORPORATORS

The name and address of the incorporators and subscribers hereto is as follows:

<u>NAME</u>		<u>ADDRESS</u>
RAFAEL H. OTERO	50% SHARES	1140 W. 50 ST. STE 305-A HIALEAH, FL 33012
EMILIA BATISTA	50% SHARES	1140 W. 50 ST. STE 305-A HIALEAH, FL 33012

ARTICLES VIII

INDEMNIFICATION

Every incorporator, director and every officer of the corporation shall be indemnified by the corporation against all expenses and liabilities, including counsel fee reasonably incurred by or imposed upon him in connection with any proceeding to which he may be a party, or in which he may become involved, by reason of his being of having been a director or officer of the corporation, or any settlement thereof, whether or not he is a director or officer at the time such expenses are incurred, except in such cases wherein the director or officer is adjudged

guilty of willful misfeasance in the performance of his duties; provided that in the event of a settlement the indemnification herein shall apply only when the Board of Directors approves, by a two-thirds vote, such settlement and reimbursement as being for the best interests of the corporation. The foregoing right of indemnification shall be in addition to and not exclusive off all other rights to which such director or officer may be entitled.

ARTICLE IX

BYLAWS

Where not inconsistent with law, or these Articles, the Bylaws of the corporation may contain any provision for the regulation and management of the affairs of the corporation, including but not limited to restrictions on the transfer or issuance of shares and voting and/or quorum requirements at shareholders and/or director meetings.

IN WITNESS WHEREOF, I have executed these Articles this _____ day of APRIL 1995

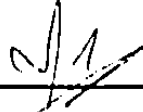


RAFAEL H. OTERO
PRESIDENT



EMILIA BATISTA
SEC/TREAS

WITNESS: My hand and official seal this 12th day of APRIL 1995, at Miami, County
of Dade, State of Florida



NOTARY PUBLIC STATE OF
FLORIDA AT LARGE

My commission expires



OFFICIAL NOTARY SEAL
JESUS A. RIBALCAJAL
COMMISSION NO. 0030007
MY COMMISSION EXP. JULY 3, 1998

LODEIRO ASSOCIATES INC.

ACCOUNTANTS AND TAX CONSULTANTS

P95000029183

**MEMBER
NATIONAL SOCIETY OF PUBLIC ACCOUNTANTS
NATIONAL ASSOCIATION OF ACCOUNTANTS
NATIONAL ASSOCIATION OF CHINESE
ACCOUNTANTS IN EXILE
NATIONAL SOCIETY OF TAX
PROFESSIONALS**

**SUNSET CENTER OFFICE PARK
10300 SUNSET DRIVE, SUITE 300
MIAMI, FL 33173
(305) 279-9320**

January 9, 1995

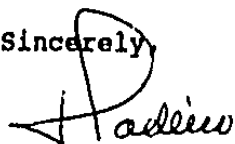
**Division of Corporations
Florida Department of State
P.O. Box 6327
Tallahassee, FL 32314**

**900001687563
-01/11/96--01113--012
*****35.00 *****35.00**

Gentlemen:

**We are enclosing the Certificate of Amendment of the Certificate of
Incorporation of Care Home Equipment Corp., together with our check
for \$35.00 to cover filing fees. Please send the acknowledgement
to our attention.**

Sincerely,



**Jose Lodeiro, MBA
Senior Accountant**

*SHK
Amend.*


**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 JAN 11 AM 10:58**

CERTIFICATE OF AMENDMENT OF
CERTIFICATE OF INCORPORATION
CARE HOME EQUIPMENT CORP.

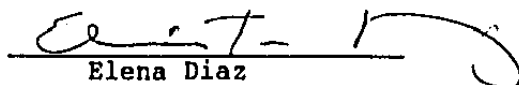
I, the undersigned, Director of Care Home Equipment Corp., organized under the Laws of the State of Florida, hereby certifies:

1. The name of the Corporation is Care Home Equipment, Corp.
2. The Certificate of Incorporation of this Corporation was filed in the Office of the Secretary of State of Florida on April 13, 1995, Document number P95000029183.
3. That Articles of Incorporation of this Corporation shall be and are amended to read as follows:
 - A. To accept the resignation of Rafael H. Otero as its Director, and Registered Agent, effective January 8th., 1996.
 - B. To accept the resignation of Emilia Batista as its Director, Secretary/Treasurer, effective January 8th., 1996.
 - C. To accept the appointment of Elena Diaz, as its new Director, President and Registered Agent.
 - D. The new address of the corporation is 10214 NW 125th. Street, Hialeah, FL 33016
 - E. That the above Amendments were adopted and approved unanimously by the Director and Shareholders of this Corporation at a joint meeting of the Directors and Stockholders which was sufficient for approval, held on January 8th., 1996

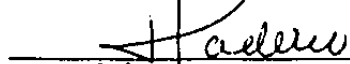
IN WITNESS WHEREOF, I have signed this Certificate this 8th day of January, 1996, at Miami, Dade County, Florida.

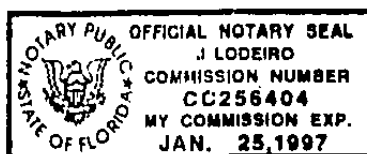

Elena Diaz
Director/President

The undersigned, Elena Diaz, is familiar with and accepts the obligations of the position of Registered Agent of Care Home Equipment, Corp. The address of the Director, President and Registered Agent is 10214 NW 125th. Street, Hialeah, FL 33016


Elena Diaz
Registered Agent

I HEREBY CERTIFY that in Dade County, Florida, on this 8th day of January, 1996, personally appeared Elena Diaz, personally known to me, who executed this Certificate of Amendment of Certificate of Incorporation, and now acknowledge before me that she subscribed to said Amendment of the aforesaid Certificate of Incorporation.


J. Lodeiro, Notary Public
State of Florida at Large



RECEIVED
SECRETARY OF STATE
JAN 11 1996

P95000029183

FILED

96 JUN 10 PM 3:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Office Use Only

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

1. Care Home Equipment Corp (Corporation Name) (Document #) Amend
2. _____ (Corporation Name) (Document #)
3. _____ (Corporation Name) (Document #)
4. _____ (Corporation Name) (Document #)

3000012345
-06/19/96--01072-015
*****35.00
FILED
96 JUN 10 PM 3:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

☒ Walk in

☒ Pick up time 2:00

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<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

96 JUN 19 AM 10:52
DIVISION OF CORPORATION

Examiner's Initials

ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF

FILED
96 JUN 19 PM 3:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CARE HOME EQUIPMENT CORP.

CARE HOME EQUIPMENT CORP.
(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).

REFER TO EXHIBIT A

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: May 26, 1996

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

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

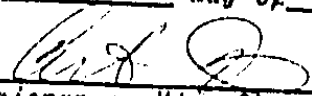
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for 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 entitled to vote separately on the amendment(s).
The number of votes cast for the amendment(s) was/were sufficient for approval by _____.


Signed this 26 day of MAY 1996.

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

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

ARTURO DIAZ
(Typed or printed name)
PRESIDENT
(Title)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE
OR 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 MAY 26, 1996

CERTIFICATE OF AMENDMENT
SCHEDULE A

ARTICLE IV
REGISTERED OFFICE AND AGENT

DELETE: ELENA DIAZ, 10214 N.W. 125TH STREET HIALEAH, FLORIDA 33016

AD: ARTURO DIAZ, 11214 PINES BOULEVARD, SUITE 145, PEMBROKE
PINE, FLORIDA 33026

ARTICLE V
PRINCIPAL PLACE OF BUSINESS

DELETE: 1140 W 50 STREET SUITE 305 A, HIALEAH FLORIDA 33012

AD: 11214 PINES BOULEVARD SUITE 145 PEMBROKE PINES, FLORIDA 33026

ARTICLE VI
DIRECTORS

DELETE: ELENA DIAZ 10214 N.W. 125 TH STREET HIALEAH, FL. 33016

AD: ARTURO DIAZ, 11214 PINES BOULEVARD, SUITE 145, PEMBROKE
PINE, FLORIDA 33026

DEBIT MEMORANDUM

FOR OFFICIAL USE

NUMBER

TO :
DEPARTMENT OF STATE

P 95000029183

STATE OF FLORIDA
OFFICE OF STATE TREASURER
TALLAHASSEE FLORIDA

FUND	AMOUNT	REASON RETURNED	KEY #
GENERAL REVENUE	0.00	INSUFFICIENT FUNDS	1
TRUST	1,978.75	ACCOUNT CLOSED	2
OTHER		UNCOLLECTED FUNDS	
TOTAL	1,978.75	OTHER	

CROSS REF	SAMAS CODE	REASON	AMOUNT
12	45-20-2-130001-45300000-00-000100-00	2	35.00
12	45-20-2-130001-45300000-00-000100-00	1	78.75
12	45-20-2-130001-45300000-00-000100-00	1	122.50
12	45-20-2-130001-45300000-00-000100-00	4	208.75
12	45-20-2-130001-45300000-00-000100-00	1	375.00
12	45-20-2-130001-45300000-00-000100-00	1	575.00
12	45-20-2-130001-45300000-00-000100-00	1	583.75

GRAND TOTAL: \$ 1,978.75

700077-A

Process Date: 06/25/96

The above named fund(s) has been reduced by the amount of this check(s) under authority of Section 215.34, F.S.

State Treasurer