

1201 HAYS STREET
TALLAHASSEE, FL 32301
(904) 224-1111
(800) 340-8080

800-340-8080



9500047440

ACCOUNT NO. : 072100000032

REFERENCE : 621503 156159A

AUTHORIZATION : *Patricia Pizzuto*

COST LIMIT : \$ 70.00

ORDER DATE : June 16, 1995

ORDER TIME : 3:06 PM

ORDER NO. : 621503

500001515925

CUSTOMER NO: 156159A

CUSTOMER: Mr. Charles Swanson
MR. CHARLES SWANSON

1300 N.w. 87th Terrace

Coral Springs, FL 33071

DOMESTIC FILING

NAME: HOLLYMOUNT DIABETIC SUPPLY,
INC.

☒ ARTICLES OF INCORPORATION
☐ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Debbie Skipper

EXAMINER'S INITIALS:

T. BROWN

JUN 19 1995

RECEIVED
95 JUN 16 PM 4:14
DIVISION OF CORPORATION
FILED
95 JUN 16 PM 12:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
HOLLYMOUNT DIABETIC SUPPLY, INC.

FILED
95 JUN 16 PM 12:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator hereby forms a corporation under Chapter 607 of the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

HOLLYMOUNT DIABETIC SUPPLY, INC.

The address of the principal office of this corporation shall be 1300 Northwest 87th Terrace, Coral Springs, Florida 33071, and the mailing address of the corporation shall be the same.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares of common stock having no par value per share.

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be 1201 Hays Street, Tallahassee, Florida 32301, and the name of the initial registered agent of the corporation at that address is Corporation Service Company.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. DIRECTORS

All corporate powers shall be exercised by or under the authority of, and the business and affairs of the corporation managed under the direction of its Board of Directors, subject to any limitation set forth in these Articles of Incorporation. This corporation shall have one Director, initially. The name and address of the initial member of the Board of Directors are:

Irene C. Swanson

1300 Northwest 87th Terrace
Coral Springs, Florida 33071

ARTICLE VII. INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation:

Corporate Agents, Inc.
1201 Hays Street
Tallahassee, Florida 32301

The undersigned incorporator has executed these Articles of Incorporation on June 16, 1995.

Gail Shelby
Incorporator
Its Agent, Gail Shelby

ACCEPTANCE OF REGISTERED AGENT DESIGNATED
IN ARTICLES OF INCORPORATION

Corporation Service Company, a Delaware corporation authorized to transact business in this State, having a business office identical with the registered office of the corporation named above, and having been designated as the Registered Agent in the above and foregoing Articles, is familiar with and accepts the obligations of the position of Registered Agent under Section 607.0505, Florida Statutes.

By: *Gail Shelby*
Its Agent, Gail Shelby
Authorized Service Representative
Corporation Service Company

DBC/dks

P95000047440

DIABETIC SUPPLY OF HOLLY MOUNT
P.O. BOX 771006
CORAL SPRINGS FL 33077
(754) 261-1000

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

RECEIVED
-10/26/95-01101-001
*****70.00 *****35.00

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

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☐ Walk in ☐ Pick up time _____

☐ 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 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

RA Chg.

VS OCT 30 1995

Examiner's Initials

Florida Department of State, Sandra B. Mortham, Secretary of State

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT
OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: Hollyhock Diabetic Supply, Inc.

1b. The mailing address of the corporation is: 1750 UNIVERSITY DR. #118
Coral Springs, FL 33071

1c. Date of Incorporation: 10-16-95 Document number: 951000047410

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

Corporate Agents (GAIL SHELL)
1201 HAYS STREET
TALLAHASSEE, FL 32301

3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

IRENE C. SWANSON
1750 UNIVERSITY DR. #118
Coral Springs, FL 33071

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Irene C. Swanson Pres.
(Signature of an officer, chairman or vice chairman of the board)

10-20-95
(Date)

Irene C. Swanson Pres.
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Irene C. Swanson Pres.
(Signature of Registered Agent)

10-20-95
(Date)

If signing on behalf of an entity:

Irene C. Swanson Pres
(Typed or Printed Name)

Pres.
(Capacity)

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