

P950000 58170

LAZARUS CORPORATE INDUSTRIES, INC.  
(Requester's Name)

890 S.W. 87 AVENUE, SUITE 16  
(Address)

MIAMI, FLORIDA 33174 (305) 552-5973  
(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE  
(904) 385-6715

OFFICE USE ONLY

FILED  
95 JUL 27 11 25A  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

1. Ashley Medical, 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

900001550249  
-08/01/95--01041--012  
\*\*\*\*122.50 \*\*\*\*122.50

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

M. HENDRICKS JUL 27 1995

Examiner's Initials

ARTICLES OF INCORPORATION  
OF  
ASHLEY MEDICAL, CORP.

FILED  
95 JUL 27 PM 2:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The under signed heroby agrees to organized a corporation in accordance with Chapter 607, Florida Statute (the "Florida General Corporation Act") as follows:

ARTICLE I. NAME

The name of the Corporation is:

ASHLEY MEDICAL, CORP.

ARTICLE II. CORPORATE EXISTENCE

The existence of the Corporation shall be perpetual comencing upon the filing of the Article of Incorporation unless dissolved according to law.

ARTICLE III. NATURE OF BUSINESS

The general nature of the business is primarily to engage in General Business and any activity, business or enterprise permitted under the laws of the United States of America and the State of Florida.

ARTICLE IV. CAPITAL STOCK

The aggregate number of shares which the Corporation shall have authority to issue and have outstanding at any one time is One Thousand (1,000) shares of common stock. One (\$1.00) Par Value.

No shareholder of the corporation shall enter into a voting trust agreement or any other type of agreement vesting another person with the authority to exercise the voting power of any or all of these stocks.

ARTICLE V. INITIAL OFFICE

The initial address of the principal office of the Corporation shall be:

1840 WEST 49th ST. SUITE#220-13  
HIALEAH, FLORIDA 33012

ARTICLE VI. DIRECTORS.

The number of directors constituting the initial board of directors shall be One (1). The number of directors may increase or decrease as provided by the Bylaws of the Corporation in the manner provided by the law.

The names and addresses of the person(s) who shall serve as the initial directors are:

JORGE M. PEREZ  
1840 WEST 49th ST. SUITE#220-13  
HIALEAH, FLORIDA 33012

#### ARTICLE VII. INCORPORATOR

The name and address of the incorporators of these Articles of Incorporation are:

JORGE M. PEREZ  
1840 WEST 49th ST. SUITE #220-13  
HIALEAH, FLORIDA 33012

#### ARTICLE VIII. REGISTERED AGENT

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.

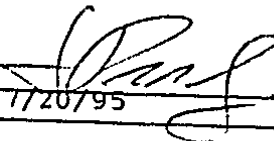
The name and address of the initial Registered Agent of the Corporation is

JORGE M. PEREZ  
1840 WEST 49th ST. SUITE #220-13  
HIALEAH, FLORIDA 33012

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 to 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 \_\_\_\_\_

Date \_\_\_\_\_

  
1/20/95

The Board of Directors may, from time to time, move the Registered Office of the Corporation to any other address in the State of Florida.


ARTICLE IX. PREEMPTIVE RIGHTS

Every shareholder shall have the right to purchase his prorata share thereof ( as nearly as may be done without issuance of fractional shares ) of any or all the shares previously issued, and/or any new issue of stocks for cash of this corporation at the price at which it is offered to other.

ARTICLE X. INDEMNIFICATION

The Corporation shall indemnify any officer or director, or any former officer or director pursuant to the provisions of section 607.014 of the Floridas Statutes, as ammended.

IN WITNESS WHEREOF, The Incorporator have signed these  
Articles on Incorporation this 20 day of JULY 1995

  
\_\_\_\_\_  
JORGE M. PEREZ

P95000058170

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

400001898104  
-07/19/96--01013--022  
\*\*\*\*\*95.00 \*\*\*\*\*35.00

Office Use Only

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

1. ASHLEY MEDICAL CORPORATION  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

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FILED  
96 JUL 19 PM 3:50  
TALLAHASSEE  
SECRETARY OF STATE

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
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<input type="checkbox"/>	Reinstatement
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<input type="checkbox"/>	Other

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF INCORPORATION  
OF**

**ASHLEY MEDICAL, CORP.**

(present name)

FILED  
96 JUL 19 PM 3:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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)

SEE ATTACHED

**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: 07/18/96

**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 the 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 group entitled to vote separately on the amendment(s).]

The number of votes cast for the amendment(s) was/were sufficient for approval by \_\_\_\_\_  
(voting group)

(continued)

**ARTICLE OF AMENDMENT TO ARTICLES OF INCORPORATION  
FOR:**

**ASHLEY MEDICAL CORP.**

**ADMENDMENT (S) ADOPTED:**

**ARTICLE IV: REGISTERED AGENT**

**THE NAME AND THE ADRESSES OF THE NEW REGISTERED AGENT  
HAS TO BE AMENMENT AS FOLLOW:**

**A) DELETE OLD REGISTERED AGENT:**

JORGE M PEREZ  
1840 WEST 49 st suite #220-13  
HIALEAH FL 33014

**B) ADD NEW REGISTERED AGENT:**

DAVID J WAGNER  
1840 WEST 49 st SUITE #220-13  
HIALEAH FL 33014

**ARTICLE V: INCORPORATORS - DIRECTOR**

**THE NAME AND ADDRESS OF THE NEW PRESIDENT SHALL BE:**

A) DELETE OLD PRESIDENT  
JORGE M PEREZ  
1840 west 49 st SUITE #220-13  
HIALEAH FL 33014

B) ADD NEW PRESIDENT  
DAVID J WAGNER  
1840 WEST 49 st SUITE #220-13  
HIALEAH FL 33014

Signed this 29 day of APRIL, 1996.

By 

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

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


George M. Perez

(Typed or printed name)

PRESIDENT

(Title)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF 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 07/18/98



P95000058170

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

RECEIVED 1995 JUL 24 PM 1:23

07/24/95 - 01053 - 0017

\*\*\*\*\*35.00 \*\*\*\*\*35.00

Office Use Only

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

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(Corporation Name)

(Document #)

2. \_\_\_\_\_

(Corporation Name)

(Document #)

3. \_\_\_\_\_

(Corporation Name)

(Document #)

4. \_\_\_\_\_

(Corporation Name)

(Document #)

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<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

1/25  
Amend



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

July 24, 1996

LAZARUS

MIAMI, FL

SUBJECT: ASHLEY MEDICAL, CORP.  
Ref. Number: P95000058170

We have received your document for ASHLEY MEDICAL, CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The incorporator(s) cannot be amended or changed. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6957.

Joy Moon-French  
Corporate Specialist

Letter Number: 296A00035695

RECEIVED  
JUL 25 1996  
DIVISION OF CORPORATIONS

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF INCORPORATION  
OF

ASHLEY MEDICAL, CORP.

(present name)

FILED  
96 JUL 25 PM 1:23  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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SEE ATTACHED

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

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(voting group)

(continued)

ARTICLE OF AMENDMENT TO ARTICLES OF INCORPORATION  
FOR:

*Ashley Medical, Corp.*

ADHENDMENT (S) ADOPTED:

ARTICLE IV: REGISTERED AGENT

THE NAME AND THE ADRESSES OF THE NEW REGISTERED AGENT  
HAS TO BE AMENMENT AS FOLLOW:

A) DELETE OLD REGISTERED AGENT:

*DAVID J WAGNER  
1840 WEST 49 ST SUITE #220-13  
Hialeah FL 33014*

B) ADD NEW REGISTERED AGENT:

*JORGE MIGUEL PEREZ  
1840 W 49 ST SUITE #220-13  
Hialeah FL 33014*

ARTICLE V:

DIRECTOR

THE NAME AND ADDRESS OF THE NEW PRESIDENT SHALL BE:

A) *DELETE OLD PRESIDENT*

*DAVID J. WAGNER  
1840 WEST 49 ST SUITE #220-13 Hialeah FL 33014*

B) *ADD NEW PRESIDENT*

*JORGE MIGUEL PEREZ  
1840 WEST 49 ST SUITE #220-13  
Hialeah FL 33014*

LAZARUS

2201440

P. 05

Signed this 23 day of Sept, 19, 96.

By

David J. Wagner

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

OR

(A director or incorporator if adopted by the directors or incorporators)

David J. Wagner

(Typed or printed name)

PRESIDENT

(Title)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF 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

[Signature]

DATE

07-23-96