

P95000058951

95 JUL 31 11:18
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
(904)385-6715

OFFICE USE ONLY

000001550320
-08/01/95--01049--007
****122.50 ****122.50

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

1. COLUMBUS DURABLE MEDICAL EQUIPMENT
(Corporation Name) (Document #) INC.
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

FILED
95 JUL 31 2 11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. HENDRICKS JUL 31 1995

Examiner's Initials

ARTICLES OF INCORPORATION

FILED
95 JUL 31 PM 2:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Columbus Durable Medical
Equipment Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

300 SW 12 AVE Suite: #2
MIAMI FL 33135

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500 shares. per 1 dollars each.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CLAUDIA JARAMILLO
5301 SW 98th.
MIAMI FL 33165

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

President: Claudia Jaramillo
5301 SW 98th
MIAMI FL 33165.

The undersigned Incorporator(s) has(have) executed these Articles of Incorporation this

28 day of July, 19 95.



Signature

Signature

Signature

Articles of Incorporation
Filing Fee - \$35

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

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.

1. The name of the corporation is: Columbus Durable medical
Equipment, INC.

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

Claudia JARAMILLO
(Name)

5301 SW 98th MIAMI FL
(P.O. Box not acceptable)

MIAMI FL 33165
(City/State/Zip)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

95 JUL 31 PM 2:11

FILED

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)

07/28/1995
(Date)

P95000058951

FLORIDA DIVISION OF CORPORATIONS
ELECTRONIC FILING SYSTEM
ELECTRONIC FILING COVER SHEET
TO: DEPARTMENT OF STATE
STATE OF FLORIDA
600 EAST GAINES STREET
TALLAHASSEE, FL 32399
FAX: (904) 922-6000
FROM: FAX FIDELITY SERVICES, INC.
8605 NW 13RD ST
SUITE 1100
MIAMI FL 33166-9000
CONTACT: LIDIA FERNANDEZ
PHONE: (305) 599-0839
FAX: (305) 592-9591
DOCUMENT TYPE: BASIC AMENDMENT
NAME: COLUMBUS DURABLE MEDICAL EQUIPMENT INC.
FAX AUDIT NUMBER: H95000013193
CURRENT STATUS: REQUESTED
DATE REQUESTED: 11/22/1995
TIME REQUESTED: 10:10:23
CERTIFIED COPIES: 0
CERTIFICATE OF STATUS: 0
NUMBER OF PAGES: 2
METHOD OF DELIVERY: FAX
ESTIMATED CHARGE: \$35.00
ACCOUNT NUMBER: 0710W10W2435
Note: Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember to type the Fax Audit number on the top and bottom of all pages of the document.
(H95000013193)
** ENTER 'M' FOR MENU. **
11/22/95 FLORIDA DIVISION OF CORPORATIONS 10:10 AM

2024 11 23 10:23

11/23/95

ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF

COLUMBUS DURABLE MEDICAL EQUIPMENT, INC.

(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)

Article V: The name and address of the person who is to serve as director:

LONNIE IRVIN CASE
335 Grand Canal Dr
Miami, Fl 33144

and

CLAUDIA JARAMILLO
5301 SW 98 Ct
Miami, Fl 33165

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:

Prepared by:

Claudia Jaramillo
5310 SW 98 Ct.
Miami, Fl 33165
(305) 225-5652

THIRD: The date of each amendment's adoption: November 20, 1995

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

☒ 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)

☐ 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 adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 21 day of November, 1995.

Signature

CB

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

OR

(By a director if adopted by the directors)

OR

(By the incorporator if adopted by the incorporators)

Claudia Jaramillo
Typed or printed name

President
Title