

195000065022

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

SUBJECT: Emergency Respiratory Care Inc.  
(If proposed corporate name - must include suffix)

300001565433  
-000-21295-0004-0001  
\*\*\*131.25 \*\*\*131.25

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

<input type="checkbox"/> \$70.00 Filing Fee	<input type="checkbox"/> \$78.75 Filing Fee & Certificate	<input type="checkbox"/> \$122.50 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$131.25 Filing Fee, Certified Copy & Certificate
Additional Copy Required			

FROM:

Luzara Lindman

Name (printed or typed)

3351 S.W. 11th Ave.

Address

Tallahassee, FL 32303

City, State & Zip

(904) 595-2005

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

## ARTICLES OF INCORPORATION

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

*Emergency Respiratory Care, Inc.*

### ARTICLE II PRINCIPAL OFFICE

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

*2351 S.W. 40th Ave  
Miami, FL 33123*

### ARTICLE III SHARES

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

*10,000 (20)*

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is

*Lazaro Landrian  
2351 S.W. 40th Ave  
Miami, FL 33123*

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Lazar Landman  
3351 S.W. 7th Ave  
Hollywood, FL 33023

Maria E. Ranno  
6000 W. 52nd #204  
Lakeland, FL 33806

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

12 day of August, 19 95

Lazar Landman

Signature

Maria E. Ranno

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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

Emergency Respiratory Care, Inc.

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

Lizanne Landman  
(NAME)

1001 N. W. 11th St.  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Hollywood, FL 33023  
(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.

Lizanne Landman

(SIGNATURE)

8-12-95

(DATE)