P95000067315

95711755 711 0: 85 EFFECTIVE DATE OFFICE USE ONLY (Document #) Andrew Shellabarger (Requestor's Name) 3600 Raintree Terrace (Address) Lakeland, FL 33803 (941) 646-3212 (City, State, Zip) (Phone #) OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): 1. Alpha Omega Medical, Inc. (Document #1 (Corporation Name) 2. \_\_\_\_\_ (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time \_ Certified Copy XX Mail out Will wait Photocopy Certificate of Status **NEW FILINGS AMENDMENTS** Amendment XX |Profit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Other Merger

REGISTRATION/

QUALIFICATION

Limited Partnership

Reinstatement
Trademark
Other

Foreign

Examiner's Initials | CA | () 8|31|9

OTHER FILNGS

Annual Report

Fictitious Name

Name Reservation

## EFFECTIVE DATE

ARTICLES OF INCORPORATION

55 742 05 7 7 1 C: 36

OF

#### ALPHA OMEGA MEDICAL, INC.

#### ARTICLE I - NAME AND ADDRESS

The name of this corporation is **Alpha Omega Medical**, **Inc.** The physical and mailing address of the corporation is 3600 Raintree Terrace, Lakeland, Florida 33803.

#### ARTICLE II - COMMENCEMENT OF CORPORATION

This corporation shall commence its corporate existence on August 21, 1995.

#### ARTICLE III - DURATION

This corporation shall have perpetual existence.

#### ARTICLE IV - PURPOSE

This profit corporation is organized for the purpose of transacting any and all lawful business.

#### ARTICLE V - CAPITAL STOCK

This corporation is authorized to issue 1000 shares of \$10.00 par value common stock.

#### ARTICLE VI - REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is: 3600 Raintree Terrace, Lakeland, Florida 33803, and the name of the initial registered agent of this corporation at that address is: Andrew Shellabarger.

#### ARTICLE VII - PRE-EMPTIVE RIGHTS

Pre-emptive rights are granted to all shareholders.

#### ARTICLE VIII - INITIAL BOARD OF DIRECTORS

This corporation shall have two directors initially. the number of directors may be either increased or diminished from time to time by the By-Laws. The name and address of the initial director of this corporation is:

Andrew Shellabarger 3600 Raintree Terrace Lakeland, FL 33803

#### ARTICEL IX - INCORPORATORS

The name and address of the persons signing these articles is:

Andrew Shellabarger 3600 Raintree Terrace Lakeland, FL 33803

IN WITNESS WHEREOF, the undersigned subscribers have executed these Articles of Incorporation this 1 day of August, 1995.

Andrew Shellabarger

STATE OF FLORIDA COUNTY OF POLK

The foregoing instrument was acknowledged before me this \_\_\_ day of August, 1995, by Andrew Shellabarger, who is personally known to me or provided a Florida drivers license, and who took and oath and affixed their signature as incorporator of Alpha Omega Medical, Inc.

JIMMY G DURDEN
My Commission CC478522
Express Jul. 06, \*999
Flonted by HAI
800-422-1555

Notary Public
Commission No.\_\_\_\_\_
Commission Exp.\_\_\_\_\_

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 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:	Alpha Omega Medical,	Inc.	<u> </u>	
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2.	The name and address of the registered agent and office is:		.yı	1	
	•			: 3	10°
	λr	drew Shellabarger			
		(Name)		(.)	書品
	36	00 Raintree Terrace			(7)
	(P.O. 1	Box <u>NOT</u> acceptable)			
	La	keland, FL 33803			
		(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.

SIGNATURE,

DATE

REGISTERED AGENT FILING FEE: \$35.00

# 500067315

7l-Dipt of State Division of Corp. P.O. BOX 6327 Tallahaviec, 7l.

RE: Change of Address For Alpha Omega Medical The # P95000067315

To Whom it May Concern:

Please change My corporation address:

Old Address. 3600 Raintree Terrace Lakeland, 72 33803

registered agent Andrew Shellabarger SS 589-54-7459

NEW Address:

Alpha Omega Medical, INC. 3005 18th Ave W.

Ph: 941-749-5985-

Bradenton, 72 34205

Wylypi Sincerely,

Andrew Shellabarger