

P95000072150

TRANSMITTAL LETTER

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

RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL  
SEP 14 1995

700001584647  
-09/14/95--01036--014  
\*\*\*\*122.50 \*\*\*\*122.50

SUBJECT: DEPENDABLE MEDICAL EQUIPMENT, INC.  
(Proposed corporate name - must include suffix)

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

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate

☒ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FROM: DEPENDABLE MEDICAL EQUIPMENT, INC.  
Name (printed or typed)

921 SE 7 PLACE  
Address

HIACLEAH, FL 33010  
City, State & Zip

(305) 798-0799  
Daytime Telephone number

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

CP 9/19/95

ARTICLES OF INCORPORATION

FILED  
SECRETARY OF STATE  
OFFICE OF CORPORATIONS  
93 SEP 16 AM 10:50

*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:

DEPENDABLE MEDICAL EQUIPMENT, INC.

ARTICLE II PRINCIPAL OFFICE

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

921 S.E. 7 PLACE  
HIALEAH, FL 33010

ARTICLE III SHARES

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

ONE THOUSAND (1,000) SHARES OF COMMON STOCK  
ONE (\$1.00) PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

AMPARO MATO  
921 S.E. 7 PLACE  
HIALEAH, FL 33010

ARTICLE V INCORPORATOR(S)

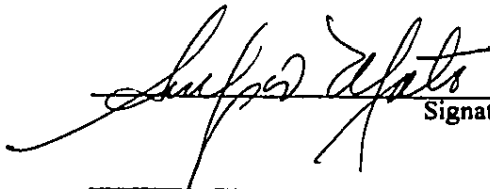
See instructions for officers/directors

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

AMPARO MATO  
331 EAST DRIVE  
MIAMI SPRINGS, FL 33166

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

7 day of SEPTEMBER, 19 95.



Signature

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**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 SEP 14 AM 10:50

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: DEPENDABLE MEDICAL EQUIPMENT, INC.

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

AMPARO MATO  
(NAME)

921 SE 7 PLACE  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

HALEAH, FL 33010  
(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)

SEPT. 7, 1995  
(DATE)