

P96000009495

TRANSMITTAL LETTER

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

200001693842  
-01/29/96--01015--016  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: BEASIDE MEDICAL SUPPLIES, 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

FILED  
96 JAN 30 PM 1:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FROM:

ANSWERTEL Unlimited SERVICES

Name (printed or typed)

261 Westward Drive #103.

Address

Miami Springs FL. 33166.

City, State & Zip

(305) 884-7700.

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

January 18, 1996

ANSWERTEL UNLIMITED SERVICES  
261 WESTWARD DRIVE #103  
MIAMI SPRINGS, FL 33166

SUBJECT: BEDSIDE MEDICAL SUPPLIES, INC.  
Ref. Number: W9600001424

We have received your document for BEDSIDE MEDICAL SUPPLIES, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$78.75.

The document must include the "registered office address".

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) 487-6923.

Doris McDuffie  
Corporate Specialist Supervisor

Letter Number: 296A00002378

ARTICLES OF INCORPORATION  
of  
BEDSIDE MEDICAL SUPPLIES, INC.

**FILED**  
96 JAN 30 PM 1:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, the undersigned, subscriber to these Articles of Incorporation each a natural person competent to contract, hereby associate myself to form a Corporation under the laws of the State of Florida.

ARTICLE I  
NAME

The name of this Corporation, is: BEDSIDE MEDICAL SUPPLIES, INC.

ARTICLE II  
NATURE OF BUSINESS

The general nature of the business and the objects and purposes to be transacted and carried on, are: SALES\BROKER. And, in general, to carry on any other business whatsoever in connection with the foregoing or which is calculated directly or indirectly, to promote the interest of the corporation or to enhance the value of it properties.

And further, to borrow or raise money for any purpose of the company and to secure the same and interest, or for any other purpose, to mortgage all or any of the property corporeal or incorporeal, rights of franchise of this company now owned or hereinafter acquired, and to create, issue, draw and accept and negotiate bonds and mortgages. Bills of exchange, promissory notes or other obligations or negotiable instruments.

ARTICLE III  
CAPITAL STOCK

The maximum number of share of stock that this Corporation is authorized to have outstanding at any one time, is: 50 Shares at \$10.00 par value.

ARTICLE IV  
AMOUNT OF CAPITAL

The amount of capital with which this Corporation will be doing business with is not less than \$500.00.

ARTICLE V  
TERM OF EXISTENCE

This Corporation is to exist perpetually.

ARTICLE VI  
ADDRESS

The initial post office address of the principal office of this Corporation in the State of Florida, is:

400 SW 107 AVENUE  
SUITE 306  
SWEETWATER  
FL. 33174

The Board of Directors may from time to time move the principal office at any other address in the State of Florida and establish branches and subsidiaries in any place within and without the State of Florida.

ARTICLE VII  
DIRECTORS

This Corporation shall have one Director initially. the number of Directors may be increased or diminished from time to time by the Laws adopted by the stockholders, but, shall never be less than one.

ARTICLE VIII  
INITIAL BOARD OF DIRECTORS

The name and post office addresses of the members of the First Board of directors, who subject to the provisions of the Certificate of Incorporation, the By-Laws and the corporation laws of the state of Florida shall hold office for the First Year of the Corporation's existence, or until their successors are elected and have qualified, are:

President-Secretary-Treasurer:

FELIPE LATA  
15891 SW 76 ST  
Miami  
Fl., 33193

**ARTICLE IX**  
**SUBSCRIBERS**

The name and post office addresses of each subscriber of these Articles of Incorporation, and the number of shares of stock each agree to take, are:

Felipe Lata.....100%.....50 Share  
15891 sw 76 st  
Miami  
Fl., 33191

**ARTICLE X**  
**AMENDMENT**

These Articles of Incorporation may be amended in the manner provided by Law. Every Amendment shall be approved by the Board of Directors, proposed by them to the stockholders, and approved at a stockholder's meeting by fifty one percent of the stock entitled to vote thereon.

  
FELIPE LATA

STATE OF FLORIDA )  
COUNTY OF DADE ) SS

WITNESS my hand and official seal, in the County and State named above, this 11 day of January of 19 96.

Lucy



Roxana Pro  
261 Westward Drive Suite 103  
Miami Springs, FL 33166  
(305)854-7700

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE  
SERVICES OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM  
PROCESS MAY BE SERVED.-----

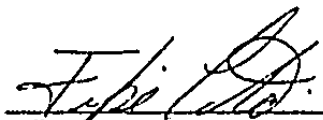
FILED  
96 JAN 30 PM 1:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

In Pursuance of Chapter 48.091 Florida Statutes, the following is submitted in  
compliance with said Act:

That BEDSIDE MEDICAL SUPPLIES, INC. desiring to organize a Corporation  
under the Laws of the State of Florida , with its principal office as indicated in the Articles of  
Incorporation, in the City of Sweetwater, County of Dade, State of Florida, has named:

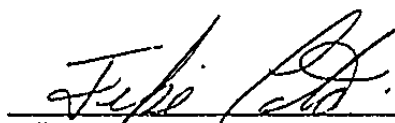
FELIPE LATA  
15891 SW 76 STREET  
MIAMI, FLORIDA 33193

as its agent to accept services of process within this State.

  
\_\_\_\_\_  
Felipe Lata

-0-

Having been named to accept services of process for the above stated Corporation, at  
the place designated in this Certificate, I hereby accept to act in this capacity and agree to comply  
with the provisions of said Act relative to keeping open said office.

  
\_\_\_\_\_  
Felipe Lata  
Registered Agent.