

FEB-15 1996 3126

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11:20 AM

(((H96000002146)))  
TO: DIVISION OF CORPORATIONS  
STATE OF FLORIDA  
409 EAST PALMER STREET  
TALLAHASSEE, FL 32399  
FAX: (904) 922-4000

CONTACT: RAY STORMONT  
PHONE: (305) 541-3094  
FAX: (305) 541-3770

DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.  
NAME: ORIETTA MEDICAL EQUIPMENT, INC.  
FAX AUDIT NUMBER: H96000002146  
DATE REQUESTED: 02/14/1996  
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DIVISION OF CORPORATIONS

*Handwritten signature*

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**FLORIDA DEPARTMENT OF STATE**  
**Sandra B. Morham**  
**Secretary of State**

February 14, 1996

**EMPIRE CORPORATE KIT COMPANY**

**MIAMI, FL**

**SUBJECT: ORIETTA MEDICAL EQUIPMENT, INC.**  
**REF: W96000003437**

We received your electronically transmitted document. However, the document has not been filed and needs the following corrections:

**PLEASE RE-FAX A DARRER COVER SHEET.**

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) 487-6934.

**Loria Poole**  
**Corporate Specialist**

**FAX Aud. #: H96000002146**  
**Letter Number: 896A00006563**

FED-14-1996 12124

P.08

PREPARED BY:  
ASIAN INSURANCE ADV, INC  
608 NW 57th AVENUE  
Miami, FLORIDA 33126  
(305) 262-4053  
MIGUEL E. TURBAY

ARTICLE OF INCORPORATION

(5)

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, do hereby adopt the following articles of incorporation:

ARTICLE ONE

The name of the corporation is Orietta Medical Equipment, Inc.

ARTICLE TWO

The duration of the corporation is perpetual.

ARTICLE THREE

The general purpose for which the corporation is organized are:

- 1.- To engage in the business of sales/ rental medical equipment.
- 2.- To transact any other lawful business for which corporations may be incorporated under the Florida General Corporation Act.
- 3.- To do such other things as are incidental to the forgoing or necessary or desirable in order to accomplish the foregoing.

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#### ARTICLE FOUR

The aggregate number of shares which the corporation is authorized to issue is 100. Such shares shall be of a single class, and shall be \$5.00 par value.

#### ARTICLE FIVE

The corporation is authorized to issue only one class of stock, and all issued stock shall be held of record by not more than ten persons. Stock shall be issued and transferable only to natural persons.

#### ARTICLE SIX

No stockholder shall have the right to sell, assign, pledge, transfer, devise, or otherwise dispose of any of the shares of the corporation without first offering such shares for sale to the corporation at the net asset value thereof.

#### ARTICLE SEVEN

The street address of the initial business office of the corporation is 13218 SW 8th Street; Miami, Florida 33184

and the name of its initial registered agent is Miguel E. Turbay.

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ARTICLE EIGHT

The number of directors constituting the initial board of directors of the corporation is one(1) . The name and address of each person who is to serve as a member of the initial board of directors is:

NAME  
Orietta N. Protuondo

ADDRESS  
13218 SW 8th Street  
Miami, Florida 33184

ARTICLE NINE

A unanimous vote of directors for effective directors action is required at all directors meetings.

ARTICLE TEN

The name and address of each incorporator is:

NAME  
Orietta N. Protuondo

ADDRESS  
13218 SW 8th Street  
Miami, Florida 33184

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Executed by the undersigned at MIAMI, FLORIDA  
on February 12, 19 96 .

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CERTIFICATE DESIGNATING (OR CHANGING) PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THE STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 607.34 Florida Statutes, the following is submitted, in compliance with said Act:

First-That Orietta Medical Equipment, Inc.  
(NAME OF CORPORATION)

desiring to organize under the laws of the State of FLORIDA  
(FLORIDA)

with its principal office, as indicated in the articles of incorporation at City of Miami county  
(CITY)

of DADE State of FLORIDA  
(COUNTRY) (STATE)

has named Miguel E. Turbay  
(NAME OF RESIDENT AGENT)

located at 608 NW 57th Avenue  
(STREET ADDRESS AND NUMBER OF BUILDING,  
POST OFFICE BOX ADDRESS NOT ACCEPTABLE)

city of FLORIDA County of DADE  
(CITY) (COUNTRY)

State of Florida, as its agent to accept service of process within this state.

ACKNOWLEDGEMENT: (MUST BE SIGNED BY DESIGNATED AGENT)

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

BY Miguel E. Turbay  
SIGNATURE  
REGISTERED AGENT  
AND  
INCORPORATOR

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