# P96000015385

LAZARUS CORPORATE INDUSTRIES, INC.
Requestor's Name

890 S.W. 87 AVENUE SUITE: 16
Address

MIAMI, FLORIDA 33174 (305)552-5973
City/State/Zip Phone #

LOCAL REPRESENTATIVE TALLAHASSEE

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### CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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1. <u>C</u>	M MEDICAL EU (Corporation Name)	(Document #)
2	(Corporation Name)	(Document #)
3	(Corporation Name)	(Document #)
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2 Walk in	Pick up time	Certified Copy
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W FILINGS	AMENDMENTS	interior to the contract of th
fit	Amendment	

NEW FILINGS		AMENDMENTS
	Profit	Amendment
	NonProfit	Resignation of R.A., Officer/ Director
I	Limited Liability	Change of Registered Agent
	Domestication	Dissolution/Withdrawa!
Į	Other	Мегдет

級	OTHER FILINGS
	Annual Report
	Fictitious Name
	Name Reservation

	REGISTRATION/ QUALIFICATION
	Foreign
	Limited Partnership
	Reinstatement
<u> </u>	Trademark
	Other

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3:71SION OF CORPORATION

789-502-672 W96-3644

Examiner's Initials

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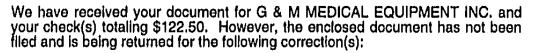
#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

February 16, 1996

LAZARUS CORPORATE INDUSTRIES, INC. 890 SW 87 AVENUE #16 MIAMI, FL 33174

SUBJECT: G & M MEDICAL EQUIPMENT INC.

Ref. Number: W96000003644



The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

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Claretha Golden Document Specialist

Letter Number: 596A00006962

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#### ARTICLES OF INCORPORATION

OF

YOU & ME MEDICAL EQUIPMENT INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the laws of the State of Florida.

#### ARTICLE I

The name of this corporation shall be:

YOU & ME MEDICAL EQUIPMENT INC.

#### ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State. State of Florida, and shall have perpetual existence.

#### ARTICLE 111

The general nature of the business and objects and purposes proposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

THE SALE AND RENTAL OF MEDICAL EQUIPMENT

- (1) / Transact any and all lawful business.
- (2) Said corporation shall further have powers:
  To have perpetual succession by its corporate name:

#### ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 100 shares, having an individual par value of \$1.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

#### ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

Gerardo Calveiro

1150 Coral Way Suite 14

Miami, F1 33129

The Principal office shall be:

1150 Coral Way Suite 14 Miami, Fl 33129

#### ARTICLE VI

The initial Board of Directors shall consist of a total of two (2) person, and the name and address of the person who is to serve as an initial director is:

Gerardo Calveiro

President

50%

Milagros Pineiro Castro Vice-President

50%

1150 Coral Way Suite 14

Miami, F1 33129

## The name and address of the incorporator executing these Articles of Incorporation is:

Gerardo Calveiro 1150 Coral Way Suite 14 Miami, Fl 33129

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ne name and address of the	is: YOU & ME MEDICAL EQUIPMENT INC.  Pregistered agent and office is:  Gerardo Calveiro (NAME)

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	· 6 Cafrean
DATE	2-15-96