LAZARUS CORPORATE INDUSTRIES, INC. Requestor's Name

090 S.W. 87 AVENUE SUITE: 16 Address

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

LOCAL REPRESENTATIVE TALLAHASSEE

Office Use Only

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

(00.1	oration Name)	DURABLE MEDICAL EQUIPM (Document W) CORP
2. <u>(Corp</u>	ouration Name)	(Document #)
1	oration Name)	(Document #)
4(Corp	oration Name)	(Document #)
图 Walk in	Pick up time 2	Certified Copy
Mail out	J will wait	Photocopy
NEW FILINGS	AMENDME	NTS LE TO ME
	Amendment	NTSUL TO THE
NEW FILINGS (4.8)	Amendment	NTS A., Officer/ Director
Profit	Amendment	A., Officer/ Director
NEW FILINGS Profit NonProfit	Amendment Resignation of R.	A., Officer/ Director

OUALIFICATION Foreign Limited Pertnership Reinstatement Trademark Other

INISION OF CORPORATIO 95 FEB 28 ANTI: 48

Annual Report

Fictitious Name

Name Reservation

ARTICLES OF INCORPORATION

OF

OF STATE OF

ESTMAX MEDICAL DURABLE MEDICAL EQUIPMENT CORP.

ARTICLE 1 - NAME

The name of this corporation is: . . .

ESTMAX MEDICAL DURABLE MEDICAL EQUIPMENT CORP.

ARTICLE II - DURATION

This corporation shall have perpetual existence commencing on the date of the filing of these Articles with the Department of State.

ARTICLE III - PURPOSE

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

ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue 100 shares of \$ 1.00 par value common stock which shall be designated "Common Shares:".

ARTICLE V - PRE-EMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation shall have the right to purchase his/her prorate share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to the others.

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT PRINCIPAL OFFICE

The street address of the initial registered office/principal office of this corporation is 2420 East 8th Avenue, Hialeah Florida, 33013 and the name of the initial registered agent of this corporation at that address is SILVIO M. LUGO

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have three directors constituting the initial Board of Directors. The number of Directors may be either increased or decreased from time to time by the BY-LAWS.

The name (s) and address (es) of the initial Board of Directors of this corporation is/are;

NAME

ADDRESS

SILVIO M. LUGO

4400 WEST 16 AVENUE HIALEAH, FL 33012

ARTICLE VIII - INCORPORATORS

The name and address of each person signing these Articles is:

NAME

ADDRESS

SILVIO M. LUGO

4400 WEST 16 AVENUE HIALEAH, FL 33012

ARTICLE IX - INDEMNIFICATION

The Corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by Law.

ARTICLE X - AMENDMENT

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservations.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this $\frac{200}{4}$ day of $\frac{100}{4}$, 199

SILVIO) N. Jugo SILVIO M. LUGO, PRESIDENT

STATE OF FLORIDA COUNTY OF DADE

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared, SILVIO M. LUGO, known to be and known by me to be the person who executed the foregoing Articles of Incorporation, and he acknowledge before me that he executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal in the

State and County aforesaid, this 2nd day of Jan.

. 199 ⁽

My Commission Expires:

IOTARY PUBLIC. STATE OF FL

OFFICIAL NOT ARY SEAL ILEANA AVILA NOTARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC375597 MY COMMISSION EXP. MAY 24,1968

Green MAY OF STATE OF

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAT BE SERVED

FIRST-- THAT ESTMAX MEDICAL DURABLE MEDICAL EQUIPMENT CORP., DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT THE CITY OF HIALEAH, STATE OF FLORIDA. HAS NAMED SILVIO M. LUGO, LOCATED AT 2420 EAST 8TH AVENUE, HIALEAH, FLORIDA 33013, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

BY:	<u> Ollro</u>	77L.	Lugo	
	PROSI		.,,	
DATE:_	12-29.	95		

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER PERFORMANCE OF MY DUTIES.

SIGNATURE: <u>SLLVIO IN. Lug</u>o DATE: 12-29-95