

P960000000042

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

300001714693

-02/14/96--01042--038

\*\*\*\*122.50 \*\*\*\*122.50

Office Use Only

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

1. AMERICAN MEDICAL SUPPLIES INC.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2:00

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☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

RECEIVED  
96 FEB 14 11:05  
DIVISION OF REGISTRATION

789-135-502-672  
W96-3430



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

RECEIVED  
26 MAR -5 AM 11:45  
DIVISION OF CORPORATION

February 14, 1996

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

SUBJECT: AMERICAN MEDICAL SUPPLIES INC.  
Ref. Number: W96000003430

We have received your document for AMERICAN MEDICAL SUPPLIES INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for microfilming.

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.

If you have any questions concerning the filing of your document, please call (904) 487-6973.

Claretha Golden  
Document Specialist

Letter Number: 496A00006553

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
96 MAR -5 PM 2:06

## ARTICLES OF INCORPORATION OF

AMERICAN MEDICAL RENTALS, 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 of 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: AMERICAN MEDICAL  
RENTALS, INC.

### ARTICLE II

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

### ARTICLE III

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:

- (1) Transact any and all lawful business.
- (2) Said corporation shall further have powers:

To have perpetual succession by its corporate name:

AMERICAN MEDICAL RENTALS INC.

### 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 this article, there shall be only one (1) class of Stock of this corporation.

### ARTICLE V

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

GUILLERMO DONADIO  
2595 SW 87 AVE MIAMI FL 33165

ARTICLE VI

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

GUILLERMO DONADIO  
(PRESIDENT)

2595 SW 87 AVE.  
MIAMI FL 33165

SUSAN SOLTERO  
SECRETARY

2595 SW 87 AVE  
MIAMI FL 33165

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

19:

2595 SW 37 AVE  
MIAMI FL 33165

IN WITNESS WHEREOF, the undersigned Incorporator has (ve) executed these Articles of Incorporation this 12 day of JANUARY, 1996

Gallardo

STATE OF FLORIDA )  
 ) SS.  
COUNTY OF DADE )

Before Me, a notary public authorized to take acknowledgments in the state and county set forth above, personally appeared Guillermo Dougan known to me and known by me to be the person (s) who executed the foregoing Articles of Incorporation, and he (they) acknowledge before me that he (they) 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 16 day of February, 1998.

**NOTARY PUBLIC, STATE OF FLORIDA AT LARGE**



MARIA ELENA HERNANDEZ  
My Commission CC489617  
Expires Apr. 20, 1998

FLORIDA  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

96 MAR -5 PM 2:06

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/ REGISTERED OFFICE**

Pursuant to the provisions of the section 607. 0501 or 617. 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: AMERICAN MEDICAL  
RENTALS, INC.

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

GUILLERMO L. DONADIO  
(NAME)

2595 SW 87 AVE  
(P.O. BOX NOT ACCEPTABLE)

MIAMI FL 33165  
(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. IN FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATES 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

Date

Guillermo L. Donadio  
2-16-96

# P96000020042

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

Office Use Only

FILED  
 97 AUG - 8 AM 10:4  
 TALLAHASSEE, FLORIDA  
 SECRETARY OF STATE

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

1. AMERICAN MEDICAL RENTALS INC  
 (Corporation Name) (Document #) 000002260720--4
2. \_\_\_\_\_  
 (Corporation Name) (Document #) 0070737 01057-020  
\*\*\*\*\*35.00 \*\*\*\*\*35.00
3. \_\_\_\_\_  
 (Corporation Name) (Document #)
4. \_\_\_\_\_  
 (Corporation Name) (Document #) Amend

☒ Walk in ☒ Pick up time 2.00 ☐ Certified Copy

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**NEW FILINGS**

<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

**AMENDMENTS**

<input checked="" type="checkbox"/>	Amendment <u>8/11/97</u>
<input type="checkbox"/>	Resignation of R.A./Officer/Director
<input type="checkbox"/>	Change of Registered Agent <u>12/1</u>
<input type="checkbox"/>	Dissolution/Withdrawal <u>12/24</u>
<input type="checkbox"/>	Merger

**OTHER FILINGS**

<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

**REGISTRATION / QUALIFICATION**

<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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 97 AUG - 7 AM 11:51  
 DIVISION OF CORPORATION

00789, 00563  
00672

Examiner's Initials	
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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

RECEIVED

97 AUG -8 PM 3: 05

DIVISION OF CORPORATION

August 7, 1997

Lazarus Corporate Industries, Inc.  
890 S.W. 87 Avenue  
Suite 16  
Miami, FL 33174

SUBJECT: AMERICAN MEDICAL RENTALS INC.  
Ref. Number: P96000020042

We have received your document for AMERICAN MEDICAL RENTALS INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

If you have any questions concerning the filing of your document, please call (850) 487-6907.

Annette Hogan  
Corporate Specialist

Letter Number: 697A00040263

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF INCORPORATION  
OF

American Medical Rentals  
INC.  
(present name)

FILED  
97 AUG -8 AM 10:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: (Indicate article number(s) being amended, added or deleted)

Article III :

THE BOARD OF DIRECTORS SHALL BE:

CARIDAD CARDOSO

President / Secretary

3701 N. MIAMI AVE.

MIAMI, FL 33137

SECOND: If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

THIRD: The date of each amendment's adoption: 7 - 30 - 97

FOURTH: Adoption of Amendment(s) (check one)

- ☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups.

*The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval by \_\_\_\_\_"  
(voting group)

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 30 day of July, 19 97

Signature

  
(By the Chairman or Vice Chairman of the Board of Directors,  
President or other officer if adopted by the shareholders)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

Guillermo Donadio

Typed or printed name

INCORPORATOR

Title