COP ORR PINGLES SY STRONIC FILING COVER SHEET 6000000**#**190 DIVISION OF CORPORATIONS FROM: FAS-T CORP. AGENTS, INC. 8405 NW 53RD ST DEPARTMENT OF STATE BUITE C-100 STATE OF FLORIDA MIAMI FL 33166-409 EAST GAINES STREET **FERNANDEZ** CONTACT: LIDIA TALLAHABBEE, FL 32399 PHONE: (305) 599-0839 FAX: (904) 922-4000 (305) 592-9591 FRX FLORIDA PROFIT CORPORATION OR P.A. (((H96@@@@319@))) DOCUMENT TYPE: NAME: RR & T MEDICAL EQUIPMENT CORP. CURRENT STATUS: REQUESTED FAX AUDIT NUMBER: H96000003190 TIME REQUESTED: 11:32:46 DATE REQUESTED: 03/06/1996 CERTIFICATE OF STATUS: Ø CERTIFIED COPIES: 1 NUMBER OF PAGES: 3 METHOD OF DELIVERY: FAX ACCDUNT NUMBER: 071001002335 EBTIMATED CHARGE: \$122.50 Note: Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember to type the Fax Audit number on the top and bottom of all pages of the document. (((H96000003190))) \*\* ENTER 'M' FOR MENU. \*\* FLORIDA DIVISION OF CORPORATIONS 11:33 AM 3/06/96

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# ARTICLES OF INCORPORATION

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The undersigned incorporator(s), for the purpose of forming a corporation which the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

## ARTICLE | NAME

The name of the corporation shall be: RR & T MEDICAL EQUIPMENT CORP.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

16933 N.W. 53rd. Ave. Miami, Florida, 33055

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ONE HUNDRED

#### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ABEL RIVAS 16933 N.W. 53rd. Ave. Miami, Florida, 33055

Prepared by: Lopez Tax Services, Inc. 2900 W. 12th Ave. Ste. 14 Hialeah, Fl 33012 (305) \$87-8025

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### ARTICLE V INCORPORATOR(8)

The name(s) and street address(es) of the incorporator(s) to these Articles of incorporation is(are):

ABEL RIVAS 16933 N.W. 53rd. Ave. Minml, Clorida, 33055

OSVALDO TOURDO 5427 N.W. 198th. Terrace Miami, Flant 33055 ARTICLE VI DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):

ABEL RIVAS 16733 N.W. 53rd. Ave. Miami, Fla. 35755 OSVALDO TOLEDO 5427 N.W. 198th. Terr. Miami, Fla. 33055

The undersigned incorporator(s) has(have) executed these Articles of incorporation this

6.th. day of March 19 96.

Signature

Signature

Signature

Articles of Incorporation Filing Fee - \$35

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 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 agant, in the State of Florida.

1.	The name of the corporation is: RR & T MEDICAL EQUIPME	NT CORP.
2.	The name and address of the registered agent and office is:	
	ABEL RIVAS (NAME)	SECRETAL - FILL AFFAS
	16933 N.W. 53rd. Ave. (P.O. BOX NOT ACCEPTABLE)	
		ပြင်
	Miami, Florida, 33055 (CITY/STATE/ZIP)	30. RIDA

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.

DATE March 6th. 1996.