

3/13/96

((H96000003526))

TO: DIVISION OF CORPORATIONS  
DEPARTMENT OF STATE  
STATE OF FLORIDA

FLORIDA DIVISION OF CORPORATIONS  
PUBLIC ACCESS SYSTEM  
ELECTRONIC FILING COVER SHEET

FROM: FAB-T CORP. AGENTS, INC.  
8405 NW 53RD ST  
SUITE C-100

10:36 AM

3/13/96

((H96000003526))

TO: DIVISION OF CORPORATIONS  
DEPARTMENT OF STATE  
STATE OF FLORIDA  
409 EAST GAINES STREET  
TALLAHASSEE, FL 32399

FLORIDA DIVISION OF CORPORATIONS  
PUBLIC ACCESS SYSTEM  
ELECTRONIC FILING COVER SHEET

FROM: FAB-T CORP. AGENTS, INC.  
8405 NW 53RD ST  
SUITE C-100  
MIAMI FL 33166-0000

10:36 AM

FAX: (904) 922-4000

CONTACT: LIDIA FERNANDEZ

PHONE: (305) 599-0839

FAX: (305) 592-9591

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DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.  
NAME: R & J MEDICAL EQUIPMENT AND SUPPLIES CORP.

FAX AUDIT NUMBER: H96000003526

CURRENT STATUS: REQUESTED

DATE REQUESTED: 03/13/1996

TIME REQUESTED: 10:36:09

CERTIFIED COPIES: 0

CERTIFICATE OF STATUS: 1

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

March 13, 1996

**FAS-T CORP. AGENTS, INC.**

**MIAMI, FL**

**SUBJECT: R & J MEDICAL EQUIPMENT AND SUPPLIES CORP.**  
**REF: W96000005554**

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

**PLEASE COMPLETE THE PRINCIPAL LOCATION IN ARTICLE I.**

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. #: H96000003526**  
**Letter Number: 296A00011315**

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68:01WV 918VH96

CE/11/02/96

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

**ARTICLES OF INCORPORATION**

**OF**

**R & J MEDICAL EQUIPMENT AND SUPPLIES CORP.**

FILED  
SECTION OF CORPORATIONS  
APR 14 PM 12:21

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

**ARTICLE I NAME**

The name of the corporation shall be: R & J MEDICAL EQUIPMENT AND SUPPLIES CORP.

The principal place of business of this corporation shall be: 5595 NW 36th St.  
Miami, FL 33166

**ARTICLE II NATURE OF BUSINESS**

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

**ARTICLE III CAPITAL STOCK**

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 500 of \$1.00 each (\$500.00)

**ARTICLE IV TERM OF EXISTENCE**

This corporation is to exist perpetually.

**ARTICLE V OFFICERS DIRECTORS**

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

ROLANDO ALVAREZ  
5553 NW 193 LN  
OPALOCKA FL 33055

Prepared by: Rolando Alvarez  
5553 N.W. 193th Lane  
Opalocka FL 33055  
(305) 883-8714

**ARTICLE VI INCORPORATION(A)**

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

ROLANDO ALVAREZ/PRESIDENT  
5553 NW 193 LN  
OPALOCKA, FL 33055

EMILIO ALVAREZ/VICE PRESIDENT  
1300 W 41th ST.  
HIALEAH, FL 33055

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this 11 day of March, 1996.

Signature(s) of Incorporator(s)

PRESIDENT

VICE/PRESIDENT

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

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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: R & J MEDICAL EQUIPMENT AND SUPPLIES CORP.

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

ROLANDO ALVAREZ  
(NAME)

5553 NW 193 LN  
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

OPALOCKA, FL 33055  
(CITY/STATE/ZIP)

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DIVISION OF CORPORATIONS  
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*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)

03/12/96  
(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314