

p96000033079

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

800001782518
-04/16/96--01089--020
****122.50 ****122.50

Office Use Only

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

1. HEALTH AID MEDICAL, INC.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out

☐ 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
TALLAHASSEE, FLORIDA
APR 15 PM 3:05

RECEIVED
DIVISION OF CORPORATION
APR 16 AM 11:15

SN APR 16 1996

ARTICLES OF CORPORATION
OF

HEALTH AID MEDICAL, INC.

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

ARTICLE I: NAME

The name of the corporation shall be:

HEALTH AID MEDICAL, INC.

The principal place of business of this corporation shall be:

18312 NW 67 AVENUE
HIALEAH, FLORIDA 33015

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:

100 SHARES AT \$5.00 PAR VALUE

ARTICLE IV: TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V: OFFICERS / DIRECTORS

The name(s) and street address(es) of the 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):

LUIS JORGE DE LA VEGA
PRESIDENT / VICE-PRESIDENT / SECRETARY / TREASURER
18312 NW 67 AVENUE
HIALEAH, FLORIDA 33015

ARTICLE VI: INCORPORATOR(S)

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

LUIS JORGE DE LA VEGA
18312 NW 67 AVENUE
MIALEAH, FLORIDA 33015

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 11 day of April, 19 96.

Signature(s) of Incorporator(s)

Luis J. De La Vega

STATE OF Florida

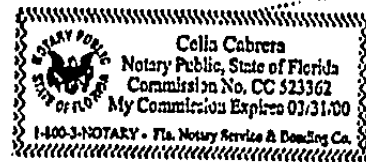
COUNTY OF Dade

THE FOREGOING instrument was acknowledged and sworn to before me this 11th day of April, 19 96, by LUIS JORGE DE LA VEGA of HEALTH AID MEDICAL, INC.
NAME OF CORPORATION

Notary Public

Celia Cabrera

(SEAL)



CERTIFICATE DESIGNATING
REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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: _____

_____ HEALTH AID MEDICAL, INC. _____

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

_____ LUIS JORGE DE LA VEGA _____

_____ 18312 N.W. 67 TERRACE _____
(P.O. BOX NOT ACCEPTABLE)

_____ MIAMI, FLORIDA 33014 _____
(CITY / STATE / ZIP CODE)

Signature: _____

Luis J. De la Vega
(Corporate Officer)

Title: _____

PRESIDENT

Date: _____

4/11/96

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 AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

Signature: _____

Luis J. De la Vega
Registered Agent

Date: _____

4/11/96

FILED
26 APR 16 PM 3:05
TALLAHASSEE, FLORIDA

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

May 24, 1996

LAZARUS CORPORATE INDUSTRIES, INC.

MIAMI, FL 33174

SUBJECT: HEALTH AID MEDICAL, INC.
Ref. Number: P96000033079

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

The amendment must be signed by an Incorporator if adopted by the Incorporators or by a director if adopted by the directors.

IN THIS CASE THE TITLE OF THE PERSON SIGNING MUST BE THAT OF "INCORPORATOR".

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) 487-6880.

Karen Gibson
Corporate Specialist

Letter Number: 296A00026106

RECEIVED
96 MAY 30 AM 10:41
DIVISION OF CORPORATIONS

ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF

~~HEALTH AID MEDICAL, INC.~~

(present name)

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 1: THE PRINCIPAL PLACE OF BUSINESS SHALL BE:

8177 NW 74 AVE
MEDLEY, FLORIDA 33166

FILED
96 MAY 30 PM 12:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: APRIL-16, 1996

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 18th day of APRIL, 1996.

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)

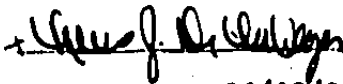
LUIS DE LA VEGA

Typed or printed name

PRESIDENT

Title

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.



04/18/96

DATE