

TRANSMITTAL LETTER

P90000033628

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

RECEIVED 17673013
-04/03/96--01001--002
***131.25 ***131.25

SUBJECT: L.M. MEDICAL SUPPLY, INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of Incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: LAZARO RODRIGUEZ
Name (printed or typed)

2452 S.W. 110 th Ave
Address

MIAMI; FL 33165
City, State & Zip

(305) 541-0046
Daytime Telephone number

FILED
96 APR 18 AM 9:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

3622952063
APR 18 1996
H-1896



FLORIDA DEPARTMENT OF STATE
Sandra B. Morthum
Secretary of State

April 9, 1996

LAZARO RODRIGUEZ
2452 S.W. 110TH AVENUE
MIAMI, FL 33165

SUBJECT: L M MEDICAL SUPPLY INC.
Ref. Number: W96000007593

We have received your document for L M MEDICAL SUPPLY INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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) 487-6933.

Dana Farmer
Document Specialist

Letter Number: 096A00016125

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: MOYA'S MEDICAL SUPPLY INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of Incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: LAZARO RODRIGUEZ
Name (printed or typed)

2452 S.W. 110th AVE
Address

MIAMI FL 33165
City, State & Zip

(305)-541-0046
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

FILED

96 APR 18 AM 9:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be:

MOYA'S MEDICAL SUPPLY INC;

ARTICLE II PRINCIPAL OFFICE

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

300 S.W. 12th AVE SUITE#2
MIAMI, FL 33130

ARTICLE III SHARES

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

1

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LAZARO RODRIGUEZ
2452 S.W. 110th AVE
MIAMI FL 33165

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

LAZARO RODRIGUEZ
2452 S.W. 110th AVE
MIAMI FL 33165

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

17 day of MARCH, 19 96.


Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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

FILED
96 APR 18 AM 9 23

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: MOYA'S MEDICAL SUPPLY INC.
2. The name and address of the registered agent and office is:

LAZARO RODRIGUEZ
(NAME)

2452 S.W. 110th AVE
(P.O. Box or Mail Drop 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. 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) 3/17/96 (DATE)