# P96000041230

LAZARUS CORPO- Requ	RATE INDUSTRIES, INC. estor'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
CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):		
1. FIVE STAR MEDICAL EQUIPMENT, INC.		
2. (Corporation Name) (Document #)		
3(Corpora	lion Name) (De	eunient #)
4		
Walk in Pick up time Certified Copy  Mail out Will wait Photocopy Certificate of Status  Profit Amendment  NonProfit Resignation of R.A., Officer/ Director  Limited Liability Dissolution/Withdrawal  Other Merger  REGISTRATION  Annual Report  Foreign  Limited Partnership  Reinstatement  Trademark  Cortified Copy  Certificate of Status  Foreign  Certified Copy  Certificate of Status  Foreign  Antendment  Antendment  Antendment  Dissolution/Withdrawal  Dissolution/Withdrawal		
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Examiner's Initials Om 5/14/90

# CERTIFICATE OF INCORPORATION OF FIVE STAR MEDICAL EQUIPMENT, INC.

We, the undersigned, hereby associate ourselves together for the purpose of becoming a corpoation under the laws of the State of Florida. Providing for the formation, rights, privileges, immunities and liabilities of incorporation for profit.

#### ARTICLE |

The name of the corporation should be:

## FIVE STAR MEDICAL EQUIPMENT, INC.

#### ARTICLE II

The corporation will engage in any activity or business permitted under the laws of the State of Florida and the United States of America.

#### **ARTICLE III**

The maximum number of shares which the corporation is authorize to issue and have outstanding at any one time is 100 shares of common stock, which shares shall be of no par value.

all stock is to be issued as fully paid and exempt from assessment.

#### **ARTICLE IV**

The pledge, sale, transfer or other disposition of the capital stock may be governed and restricted by the by-laws or written agreement among the stockholders which shall be on file in the office of the corporation.

#### ARTICLE V

The amount of capital with which its corporation may begin doing business shall be not less than five hundred dollars (\$500.00).

#### ARTICLE VI

The existence of the corporation is perpetual.

#### **ARTI CLE VII**

The initial post office address of the principal office of corporatin in the State of Florida is: 11201 SW 55 STREET BOX 97 MIRAMAR, FL 33025.

The board of directors may from time to time move the principal office to any other address in the State of Florida. The registered address of the corporation is: 11201 SW 55 STREET BOX 97, MIRAMAR FL 33025

The registered agent a the address is: MARIANITZA ACOSTA

#### **ARTICLE VIII**

The business of the corporation shall be managed by a board of directors consisting of no less than two nor more than five directors. A quorum for the holding of a meeting of the board of directors and for the transactions of any business which will be properly done by the directors on behalf o the corportion shall consist of majority of members thereof; but the directors, by unanimous consent in writing, included among the minutes of the corporation, may consent to the doing of any act and such consent in writing shall have the same force and effect as though the said act had been done and authorized at a meeting at which a quorum had been present, or such duties may be delegated to an executive committee.

## **ARTICLE IX**

The names and post office of the members of the first board fo directors and the slate of corporate officers are as follows:

MARIANITZA ACOSTA PRESIDENT MANUEL ACOSTA DIRECTOR

11201 SW 55 STREET MIRAMAR, FL 33025 11201 SW 55 STREET MIRAMAR, FL 33025

# ARTICLE X

The stock of the corporation may be issued persuant to the provisions of section 1244 of the Internal Revenue Service code, so that the stockholders of the Corporation may receive the benefits provided thereunder.

In witness whereof, we have hereunto set our hands and seals, this 8TH day of May of 1996.

MARIANITZA ACOSTA, INCORPORATOR

11201 SW 55 STREET MIRAMAR, FL 33025

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

Persuant to the provisions of the section 607.0501, Florida Statutes, the undersigned corporation, organized under the Laws of the State of Florida.

The name of the corporation is:FIVE STAR MEDICAL EQUIPMENT, INC. desiring to organize or qulify under the laws of the State of Florida, with its principal place of business at City of Miami, State of Florida named: MARIANITZA ACOSTA located at 11201 SW 55 STREET BOX 97, MIRAMAR, FL 33025 agent to accept process in State of Florida County of Dade.

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.

MARIANITZA ACOSTA REGISTERED AGENT