

P96000044335

N.Y. Filings
 Requestor's Name
 10025 N.W. 116 Way
 Address Suite 16
 Miami, FL 33178
 City/State/Zip Phone #

1-800-441-1225
 1-057-207-1000-01121-0120
 ***122.50 ***122.50

Office Use Only

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

1. Tan Bocskai, (LA)
(Corporation Name) (Document #)
2. Rel. Jumanilla
(Corporation Name) (Document #)
3. 11701 NW 101st Rd
(Corporation Name) (Document #)
4. Miami 33178-021
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input 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

FILED
 96 MAY 20 PM 5:45
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

*Noted
 CRG*

Examiner's Initials	
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**ARTICLES OF INCORPORATION
OF
FULL-MED SUPPLIES, INC.**

FILED
JAN 20 PM 5:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I

Name

The name of the corporation is Full-Med Supplies, Inc. (hereinafter called the "Corporation").

ARTICLE II

Principal Office

The address of the principal office and the mailing address of the Corporation is 10025 N.W. 116 Way, Suite 16, Miami, Florida 33178.

ARTICLE III

Common Stock

The capital stock authorized, the par value thereof, and the characteristics of such stock shall be as follows:

Number of Shares Authorized	Par Value Per Share	Class of Stock
1,000	\$.01	Common Stock

ARTICLE IV

Registered Office and Agent

The street address of the Corporation's initial registered office in the State of Florida is 10025 N.W. 116 Way, Suite 16, Miami, Florida 33178, and the name of its initial registered agent at such office is Nily Falic.

ARTICLE V

Incorporator

The name of the Incorporator is Nily Falic, and the address of the Incorporator is 10025 N.W. 116 Way, Suite 16, Miami, Florida 33178.

ARTICLE VI

Indemnification

The Corporation shall indemnify and shall advance expenses on behalf of its officers and directors to the fullest extent permitted by law in existence either now or hereafter.

ARTICLE VII

Board of Directors

The Board of Directors of the Corporation shall consist of at least one director, with the exact number to be fixed from time to time in the manner provided in the Corporation's bylaws. The number of directors constituting the initial Board of Directors is one (1), and the name and address of the member of the initial Board of Directors, who is to serve as the Corporation's director until her successors are duly elected and qualified, is:

Name

Address

Nily Falic

10025 N.W. 116 Way, Suite 16
Miami, Florida 33178

IN WITNESS WHEREOF, the undersigned, being the Incorporator named above, for the purpose of forming a corporation pursuant to the Florida Business Corporation Act of the State of Florida, has signed these Articles of Incorporation this 16th day of May, 1996.

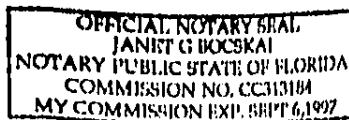

Nily Falic
Incorporator

STATE OF FLORIDA }
COUNTY OF DADE } ss:

BEFORE ME, the undersigned authority, personally appeared Nily Falic, to me known to be the person described in and who executed the foregoing Articles of Incorporation, who, after being duly sworn under oath, acknowledged before me that said person executed the same for the purpose therein expressed.

WITNESS my hand and official seal in the State and County aforesaid, this 16th day of May, 1996.

My Commission Expires:



Janet G. Bocskai
Notary Public *Janet G. Bocskai*
State of Florida at Largo

ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT

The undersigned, having been named the Registered Agent of Full-Med Supplies, Inc., hereby accepts such designation and is familiar with, and accepts, the obligations of such position, as provided in Section 607.0505 of the Florida Business Corporation Act.

Nily Falic
Nily Falic
Registered Agent

DATED: May 16, 1996

FILED
96 MAY 20 PM 5:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA