

P96000054546

TRANSMITTAL LETTER

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

400001886414
-07/08/96--01039--015
****122.50 ****122.50

SUBJECT: Integrated Medical Supply, Co.
(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: Eusebio C. Noblefranca, Jr.
Name (printed or typed)

7462 NW 167th Street
Address

Miami, FL 33015
City, State & Zip

(305) 819-4073
Daytime Telephone number

JUN 26 1996

BSB

FILED
95 JUN 26 PM 3:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLES OF INCORPORATION

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:

Integrated Medical Supply, Co.

ARTICLE II PRINCIPAL OFFICE

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

*7462 NW 167th Street
Miami, FL 33015*

ARTICLE III SHARES

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

500 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

*Eusebio C. Noblefranca, Jr.
7462 NW 167th Street
Miami, FL 33015*

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TALLAHASSEE, FLORIDA

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):

1. Leona Barnes
8831 SW 142nd Avenue #1918
Miami, FL 33186
2. Karlene V Case
19451 NW 6th Avenue
Miami, FL 33169
3. Eusebio C Noblefranca, Jr.
7462 NW 167th Street
Miami, FL 33015
4. Urtina V. Quintana
225 NE 96th St.
Miami Shores, FL 33138

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

25th day of June, 19 96.

(An additional article must be added if an effective date is requested.)


Signature


Signature


Signature


Notarization is not required

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**

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.

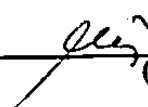
1. The name of the corporation is: Integrated Medical Supply, Co.

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

Eusebio C. Noblefranca, Jr.
(NAME)
7462 NW 167th Street
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)
Miami, FL 33015
(CITY/STATE/ZIP)

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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)

6/25/96
(DATE)