

P97000076631

TRANSMITTAL LETTER

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

200002281962--5  
-09/02/97--01031--018  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: L.A.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: L.A.S. Medical Supply Inc.  
Name (printed or typed)

P.O. Box 574646  
Address

Orlando FL 32807  
City, State & Zip

407-940-8367 - 407-240-1430  
Daytime Telephone number

FILED  
97 SEP -2 PM 2:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Nodouau SEP 4 1997

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:

L.A.S. Medical Supply Inc.

97 SEP -2 PM 2:15  
NOTARY PUBLIC  
TALLAHASSEE, FLORIDA

FILED

### ARTICLE II PRINCIPAL OFFICE

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

Principal Place  
235 E. Oak Ridge Rd  
A-123  
Orlando FL 32809

Mailing - P.O. Box 574646  
Orlando FL 32807

### ARTICLE III SHARES

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

ONE thousand

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Luis Alberto Saldaña  
1214 Peach Ln.  
Orlando FL 32839

**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):

Luis Alberto Saldana  
235 E. Oak Ridge Rd  
A-123  
Orlando FL 32809

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

12 day of April, 19 97.

(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: L.A.S Medical Supply Inc.

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

Luis A. Saldaña  
(NAME)

235 E. Oakridge Rd (A-123)  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Orlando FL 32809  
(CITY/STATE/ZIP)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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.*

Luis A Saldaña  
(SIGNATURE)

April 12, 1997  
(DATE)