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FLORIDA DIVISION OF CORPORATIONS  
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TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: FAS-T CORP. AGENTS, INC.  
CONTACT: LIDIA FERNANDEZ  
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NAME: QUALITY MEDICAL RENTALS & SALES, INC.

AUDIT NUMBER.....H98000009795

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..1

PAGES..... 4

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AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

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98 MAY 27 AM 8:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION

98 MAY 27 AM 8:16

OF

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

QUALITY MEDICAL RENTALS & SALES, INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

ARTICLE I

The name of the corporation shall be:

QUALITY MEDICAL RENTALS & SALES, INC.

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purposes proposed to be transacted and carried on by this corporation are to do any and all of the things therein mentioned, as fully and to the same extent as natural persons might do, viz:

PREPARED BY: ANA DALMAU ARES  
4080 SW 84 Ave. Suite C  
Miami, Fl. 33155  
(305) 229-8256

- (1) Transact any and all lawful business,
- (2) Said corporation shall further have powers:  
To have perpetual succession by its corporate name,  
QUALITY MEDICAL RENTALS & SALES, INC.

ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 50 shares, having an individual par value of \$10.00.  
Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

ANA D. ARES  
4080 SW 84TH AVENUE  
MIAMI, FL. 33155

The principal office shall be:

4080 SW 84TH AVENUE  
MIAMI, FL. 33155

ARTICLE VI

The initial Board of Directors shall consist of a total of  
(2) person, and the name and address is:

JENNIFER ARJONA  
15361 SW 43TH TERRACE  
MIAMI, FL. 33185

PRESIDENT

NICHELE CRUZ  
15361 SW 43TH TERRACE  
MIAMI, FL. 33185

SECRETARY/TREASURER

The name and address of the incorporator executing these  
Articles of Incorporation is:

ANA D. ARES  
4080 SW 84 AVE  
MIAMI, FL. 33155

IN WITNESS WHEREOF, the undersigned incorporator has executed  
these Articles of Incorporation, this 26TH day of MAY, 1998.

  
ANA D. ARES

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

Pursuant to the provision of sections 607.0501 or 617.0501, 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:

**QUALITY MEDICAL RENTALS & SALES INC.**

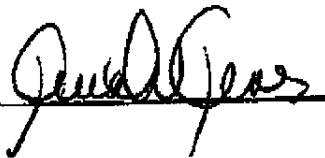
2. The name and address of the registered agent and office is:

**ANA D. ARES  
4080 SW 84 AVE.  
MIAMI, FL. 33155**

**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**



**FILED**

**98 MAY 27 AM 8:16**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**