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CORPORATION	NAME(S) & DOCUMENT N	JMBER(S), (if known):	
1(Corp	oration Name)	(Document #)	
		(Document #)	
_	oration Name)	(Document #)	· ·
Δ	oration Name)	(Document #)	
	Pick up time Will wait Photocop	<del></del> -	
NEW FILINGS	AMENDMENTS	reference (n. 1946). Here are a second of the second of th	
Profit	Amendment		99 TAL TAL
NonProfit	Resignation of R.A., Officer/1	Resignation of R.A., Officer/ Director	
Limited Liability	Change of Registered Agent		
Domestication	Dissolution/Withdrawal	Dissolution/Withdrawal	
Other	Merger		
OTHER FILINGS	REGISTRATION/- QUALIFICATION.	*** *** *** *** *** *** *** *** *** **	IZ IDA
Annual Report	Foreign		
Fictitious Name	Limited Partnership		
Name Reservation	Reinstatement	-	
	Trademark		

Other

Examiner's Initials 3/22/99

## ARTICLES OF INCORPORATION

E and I mobil Medical Supr	Dia Fran	•		
(name of corpor	ation)			
The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.				
ARTICLE I - CORPOR	ATE NAME -	CREET EN T		
The name of the corporation is:  Eard J Mobil Medical Supple	her Inc	ASSEE AS ASSEE AS ASSEE AS ASSEE AS ASSEE AS ASSEE AS ASSEE AS ASSEE AS ASSEE AS AS ASSEE AS AS ASSEE AS AS AS AS AS AS AS AS AS AS AS AS AS		
ARTICLE II - DUI		FS 1A		
This corporation shall exist perpetually unless dissolved according to Florida law.				
ARTICLE III - PU	RPOSE	- ٠ -		
The corporation is organized for the purpose of engaging in any United States and the State of Florida.	activities or business permitted une	der the laws of the		
ARTICLE IV - CAPIT.	AL STOCK			
The corporation is authorized to issue we hundred	shares (500 ) of	ne		
Dollar(s) (\$ 1,60 ) par value Common Stock,	which shall be designated "Comr	mon Shares."		
ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT				
The principal office, if known, or the mailing adress of the corporation is:				
VAME SI Tolde				
ADDRESS 4298 S. Unwersity Dawe				
erry Davie	FLORIDA	ZIP 33328		
The name and street address of the Initial Registered Agent of	of this Corporation is:			
VAME Sel Totales				
ADDRESS 4298 S. unwersty Drive				
eny Davie J	`FLORIDA	ZIP 33325/		
ARTICLE VI - INITIAL BOAR	D OF DIRECTORS	<i>y</i>		
This corporation shall have (				
VAME Sel Toroler				
ADDRESS 42985 unwenty Drive				
erry Davie J	STATE Flag	ZIP 73328		
NAME				
ADDRESS				
CITY	STATE	ZIP		
NAME				
ADDRESS				
רירץ	STATE	ZIP		

PAGE 1

SEMINOLE-MIAMI

FORM 215: ARTICLES OF INCORPORATION, PAGE 1

## ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME GIL POEDER		
	rite Drive	
CITY Davie	STATE FL	ZIP 33320
NAME		-
ADDRESS		700
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP
in Witness Whereof, the undersigned day of March, 19 99.	subscriber(s) have executed these Articles of In	corporation this / S (Seal)
		(0.1)
		(Seal)
		(Seal)
STATE OF FLORIDA	)	
COUNTY OF Browns	SS)	
before me, a Notary Public authorized to tal appeared:	ke acknowledgments in the State and County	set forth above, personally
0 07 .	Fla Driver Lice	raes
Jel Vorder	P360-298-34	- 937
Signature	Form of Identif	cation
Signature	Form of Identif	ication
Signature	Form of Identif	ication
	executed the foregoing Articles of Incorporation es of Incorporation, that I relied upon the formcame, and that an oath was (was not) taken.	
NOTARY RUBBER STAMP SEAL	Witness my hand and official seal in the C this 10 th day of 10 A Ch	ounty and State last aforesaid
Jan M Novak  Jan M Novak  My Commission CC639215	Jean Nava	£
Expires April 15, 2001	Notary Signature TEAN M.	120UAL
	Printed Notary Signature	The state of the s

# CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

#### CERTIFICATE OF REGISTERED AGENT

OF

Earl & Mobil Medical Supplies Inc.

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 4298 S. University	Drwe
Davie Fla 73	328
has named Silvordin	

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

### ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

SECRETARY OF STATE OF