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2(Co	poration Name) (Docu	BER(S), (if known):
Walk in Mail out	Pick up time     Will wait   Photocopy	ument #)
NEW FILINGS         Profit         NonProfit         Limited Liability         Domestication         Other	AMENDMENTS         Amendment         Resignation of R.A., Officer/Director         Change of Registered Agent         Dissolution/Withdrawal         Merger	900002941779
Other OTHER FILINGS Annual Report Fictitious Name Name Reservation	Merger          REGISTRATION/         QUALIFICATION         Foreign         Limited Partnership	]
	Reinstatement Trademark Other	Examiner's Initials

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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 2, 1999

JUAN C. VIERA 5221 SW 128TH CT. MIAMI, FL 33175

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SUBJECT: J. R. ENTERPRISES, INC. Ref. Number: W99000017791

We have received your document for J. R. ENTERPRISES, INC. and your check(s) totaling \$75.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6933.

Teresa Brown Corporate Specialist

Letter Number: 899A00039044

# **ARTICLES OF INCORPORATION**

SECRE 10 FD 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: J. R. MEDICAL, INC.

#### **ARTICLE II: PRINCIPAL OFFICE**

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

5221 S.W. 128th Court Miami, Fl. 33175

#### **ARTICLE III: SHARES**

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

500 Shares US\$5.00 Each

#### ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS:

Barbara P. Viera 5221 S.W. 128th Ct. Miami, Fl. 33175

#### ARTICLE V: INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Juan C. Viera- President/ Vice President: 5221 S.W. 128th Ct., Miami, Fl. 33175

Barbara P. Viera- Re. Agent: 5221 S.W. 128th Ct., Miami, Fl. 33175

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 21st day of July, 1999.

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

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 : J. R. MEDICAL, INC.

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

#### BARBARA P. VIERA 5221 S.W. 128th Ct. MIAMI, FL. 33175

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 obligation of my position as registered agent.

Signature

7-22-99

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL. 32314