

P99000074624

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H99000020939 7)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)922-4001

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

R.I.D. MEDICAL EQUIPMENT, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 AUG 20 PM 4:16

Electronic Filing Menu

Corporate Filing

Public Access Help

S. McKnight AUG 20 1999

ARTICLE OF INCORPORATION

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, do hereby adopt the following articles of incorporation:

ARTICLE ONE

The name of the corporation is R.I.D MEDICAL EQUIPMENT, INC

ARTICLE TWO

The duration of the corporation is perpetual.

ARTICLE THREE

The general purpose for which the corporation is organized are:

- 1.- To engage in the business of RENT AND SALE EQUIPMENTS.
- 2.- To transact any other lawful business for which corporations may be incorporated under the Florida General Corporation Act.
- 3.- To do such other things as are incidental to the forgoing or necessary or desirable in order to accomplish the foregoing.

PREPARED BY: ASHLAND ASSURANCE, INC
AILIN TURBAY
608 N.W 57th AVE
MIAMI, FL 33126
(305) 262-4053

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 AUG 20 PM 4:16

ARTICLE FOUR

The aggregate number of shares which the corporation is authorized to issue is 100. Such shares shall be of a single class, and shall be \$5.00 par value.

ARTICLE FIVE

The corporation is authorized to issue only one class of stock, and all issued stock shall be held of record by not more than ten persons. Stock shall be issued and transferable only to natural persons.

ARTICLE SIX

No stockholder shall have the right to sell, assign, pledge, transfer, devise, or otherwise dispose of any of the shares of the corporation without first offering such shares for sale to the corporation at the net asset value thereof.

ARTICLE SEVEN

The street address of the initial business office of the corporation is 3366 S.W 25 TERRACE MIAMI, FL 33133
and the name of its initial registered agent is
AILIN TURBAY.

ARTICLE EIGHT

The number of directors constituting the initial board of directors of the corporation is ONE . The name and address of each person who is to serve as a member of the initial board of directors is:

NAME	ADDRESS
ANA R MARTINEZ-PRESIDENT	3366 S.W 25 TERRACE MIAMI-FL 33133

ARTICLE NINE

A unanimous vote of directors for effective directors action is required at all directors meetings.

ARTICLE TEN

The name and address of each incorporator is:

NAME	ADDRESS
AILIN TURBAY	608 N.W 57 AVE MIAMI,FL 33126

Executed by the undersigned at MIAMI, FLORIDA
on AUGUST, 19 99 .

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 AUG 20 PM 16

CERTIFICATE DESIGNATING (OR CHANGING) PLACE OF BUSINESS OR DOMICILE
FOR THE SERVICE OF PROCESS WITHIN THE STATE, NAMING AGENT UPON WHOM
PROCESS MAY BE SERVED.

In pursuance of Chapter 607.34 Florida Statutes, the following is
submitted, in compliance with said Act:

First-That R.I.D MEDICAL EQUIPMENT, INC
(NAME OF CORPORATION)
desiring to organize under the laws of the State of FLORIDA
(FLORIDA)
with its principal office, as indicated in the articles of
incorporation at City of MIAMI county
(CITY)
of DADE State of FLORIDA
(COUNTRY) (STATE)
has named ALLIN TURBAY
(NAME OF RESIDENT AGENT)
located at 608 N.W. 57 AVE MIAMI, FL 33133
(STREET ADDRESS AND NUMBER OF BUILDING,
POST OFFICE BOX ADDRESS NOT ACCEPTABLE)
city of FLORIDA County of DADE
(CITY) (COUNTRY)
State of Florida, as its agent to accept service of process within
this state.

ACKNOWLEDGEMENT: (MUST BE SIGNED BY DESIGNATED AGENT)

Having been named to accept service of process for the above
stated corporation, at place designated in this certificate. I
hereby accept to act in this capacity, and agree to comply with the
provision of said Act relative to keeping open said office.

BY 

SIGNATURE
REGISTERED AGENT
AND
INCORPORATOR