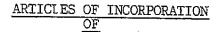
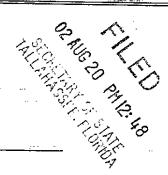
OFFICE USE ONLY (DOCUMENT #) LAZARUS CORPORATE FILING SERVICE 3320 S.W. 87 AVENUE MIAMI, FLORIDA (305)552-5973 TERESA ROMAN (TALLAHASSEE REPRESENTATIVE) CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Hame) (Document #) (Corporation Name) (Document #) Pickup time 2.60 Walk in Certified Copy Photocopy Certificate of Status Mail out Will wait AMENDMENTS NEW FILINGS AUG 20 AM 10: 53 Profit Amendment Resignation of R.A., Officer/Director NonProfit Change of Registered Agent **Limited Liability** Dissolution/Withdrawal Domestication Merger Other REGISTRATION OTHER FUNGS QUALIFICATION Annual Report Foreign Fictitious Name

Limited Partnership Reinstatement Trademark Other

Name Reservation





VANGUARD ORTHOPEDICS INC

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

CORPORATION NAME

The corporation's name shall be: <u>VANGUARD ORTHOPEDICS INC</u>

ARTICLE II

DURATION

This corporation shall exist perpetually unless dissolved according to Florida laws.

ARTICLE III

PURPOSE

The corporation is organized for the purpose of engaging in any activity of business permited under the laws of the United States and the State of Florida.

ARTICLE IV CAPITAL STOCK

The corporation is authorized to issue <u>One hundred(100</u>) shares of <u>Five</u> (\$5.00) par value Common Stock, which shall be designated "Common Shares".

ARTICLE V

PLACE OF BUSINESS

The principal place of business of said corporation shall be:

2125 Biscayne Blvd # 370 Miami, FL 33137

ARTICLE VI

NUMBER OF DIRECTORS

The number of Directors of this corporation, shall be no less than one (1) nor more than fifteen (15).

ARTICLE VII

BOARD OF DIRECTORS

ADDRESS: 17890 NE 31 Circle # 3202

NAME: TONY RICCARDO KEATON

The name and adresses of the first Board of Directors of this Corporation who shall hold office initially, are as follow:

	CITY: Aventura STATE: FL Z.C.: 33160	
	NAME:	•
	ADDRESS:	**
	CITY: STATE: Z.C.:	e
	MANGE	
	ADDRESS:	•
	OTTIDIATEZ.G.:	a"
	ARTICLE VIII	
	INCORPORATORS	•
The rincorporat	name and addresses of the incorporators signing these Art	icles of the
I	NAME: TONY RICCARDO KEATON TITLE: President	
	ADDRESS: 17890 NE 31 Circle # 3202	
	CITY: Aventura STATE: FL Z.C.: 33160	-
	NAME:TITLE:	_
	ADDRESS:	
(CITY: STATE: Z.C.:	-
	NAME: ADDRESS:	
(ADDRESS:STATE:Z.C.:	
IN W. Articles	ITNESS WHEREOF, the undersigned subscriber(s) have exec of Incorporation, this 19 day of August	uted these of 2002
	August August	<u>01, 499,4</u>
RE	My (Seal)	(Seal)
	(Seal)	
	(Seal)	
		—(pear)

STATE OF FLORIDA) COUNTY OF MIAMI DADE)
Before me, a Notary Public authorized to take acknowledgement in the State and County set for above, personally appeared:
TONY RICCARDO KEATON
known to me and known to be the person(s) who executed the foregoing
Articles of Incorporation, and who acknowledged before me that HE
executed these Articles of Incorporation.
IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and county aforesaid, this 19 day of August of 2002.

Notary Public State of Florida at large

LOURDES BALLINA
MY COMMISSION # DDW9677
EXPIRES: August 13, 2005
1-9003-NOTARY FL Notary Service & Bonding, Inc.

CERTIFICATE OF REGISTERED AGENT

<u>OF</u>

VANGUARD ORTHOPEDICS INC
In pursuance of Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said Act:
FIRST: That VANGUARD ORTHOPEDICS INC desiring to
organize under the laws of the State of Florida with its principal office
as indicated in the articles of incorporation at city of,
County of Miami-Dade State of Florida , has named:
To: TONY RICCARDO KEATON
Located at: 17890 NE 31 Circle # 3202
City of: Miramar County of: Miami-Dade
State of Florida.
at its Agent to accept service of process within this State.

ACKNOWL EDGEMENT

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.

Registered Agent

OZ AUG 20 PHI2: 48
SECHETANY DE SIATE
TALLANASSE DE SIATE