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LAZARUS CORPORATE FILING SERVICE	
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MIAMI, FLORIDA (305)552-5973	
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CORPORATION NAME(S) & DOCUMENT NUM	RFD(S) (if known)
1. QUEEN MEDICAL EQ.	UIPMENT INC.
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4. (Corporation Nama)	(Document #)
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Annual Report Foreign	
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Trademark	

Other

Examiner's Initials

CR2E031(9/92)

ARTICLES OF INCORPORATION

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 1 - NAME

The name of the corporation shall be:							
Queen	Hodracel	Equipment I	AHASSE				
	ARTICLE	u poincipal office	OF STAIL E, FLORID	PM 12: 58	Ü		
ARTICLE 11 - PRINCIPAL OFFICE							

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

11601 Broagne Boulevard Suite 200E Worth Altaini FL 33181.

ARTICLE III -SHARES

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

100.

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Daniel De Jeon. 1701 Worth Treasure Drive April #3 Worth Bay Village FL 33411

ARTICLE V - INCORPORATOR

The name and streg	t address of the i	ncorporator to	these Articles of
Incorporation is:	Daniel Dod	PAA	
	1701 Dorth	Tregoure?	Doive April 13 FL33141.
	Work Day	Village	FL33141.
The undersigned in	corporator has ex	ecuted these	Articles of
Incorporation this _	D day of	200	<u>4</u>
		D	
	Signatu	ire	
	•		

ARTICLE VI- DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are): Daniel De Jeon.
1701 North Heasure Dieux Apt #3
Worth Bay Vellage.

Fl. 22(4)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature