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LAW OFFICES
GELB & SPATZ

3400 SOUTHWEST THIRD AVENUE
MIAMI FLORIDA 33145

MONROE GELB
CARL A SPATZ

MIAMI 305 6233 1308
BROWARD 305 6485 1308
FAX NO 305 6116 1308

January 5, 1995

Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32399

FILED
95 JAN -9 PM 3:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: WOLF MEDICAL SUPPLY, INC.

Dear Sirs:

In reference to the captioned corporation, please find enclosed herewith the following:

1. Original and an executed copy of the Articles of Incorporation.
2. A check made payable to the Division of Corporations in the sum of \$122.50 for the following:

Filing Fee	\$ 35.00
Certified copy of	
Articles of Incorporation	52.50
Registered Agent Designation	<u>35.00</u>

800001373918
-01/09/95--01078--005
****122.50 ****122.50

TOTAL \$122.50

Please return to the undersigned a certified copy of the Articles of Incorporation in the envelope enclosed for your convenience.

Very truly yours,

GELB & SPATZ

BY: Monroe Gelb
MONROE/GELB

CAS/edj
Encl.

D. BROWN JAN 10 1995

ARTICLES OF INCORPORATION
OF
WOLF MEDICAL SUPPLY, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I

The name and physical address of the corporation is:

Wolf Medical Supply, Inc.
17890 Northeast 31 Court, Miami, Florida 33160

ARTICLE II

This corporation shall have perpetual duration:

ARTICLE III

The purpose for which this corporation is organized is the transaction of any and all lawful business for which corporations may be incorporated under the Florida General Corporation Act.

ARTICLE IV

The aggregate number of shares the corporation is authorized to issue is one hundred (100) shares, each share to be of \$100.00 par value.

ARTICLE V

The street address of the registered office of the corporation is 17890 Northeast 31 Court, Miami, Florida 33160, and the name of the registered agent is Gary Woolfson.

ARTICLE VI

The number of directors constituting the initial Board of Directors of the corporation is one (1) and the name and address of the person serving as director until their successor is elected is:

NAME:

Gary Woolfson

ADDRESS:

17890 Northeast 31 Court
Miami, Florida 33160

ARTICLE VII

The name and address of the sole incorporator is:

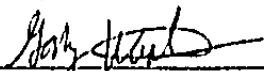
NAME:

ADDRESS:

Gary Woolfson

17890 Northeast 31 Court
Miami, Florida 33160

Dated this 30 day of December, 1994.



Gary Woolfson

STATE OF FLORIDA)
)SS
COUNTY OF DADE)

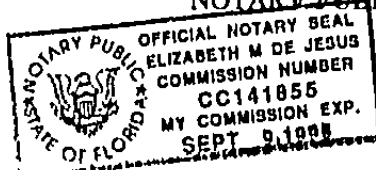
I HEREBY CERTIFY that on this day before me personally appeared Gary Woolfson who is personally known to me to be the person described in and who executed the foregoing Articles of Incorporation and acknowledged before me that he executed same of his voluntary act and deed.

Witness my hand and seal in the County and State last aforesaid this 30 day of December, 1994.

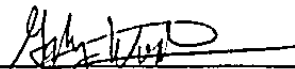


NOTARY PUBLIC, STATE OF FLORIDA

My commission expires:



The undersigned hereby accepts the designation of registered agent in the State of Florida for Wolf Medical Supply, Inc., and hereby agrees to serve as registered agent until which designation is terminated in accordance with the Florida General Corporation Act.



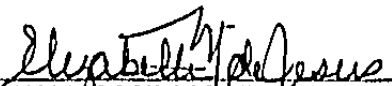
GARY WOOLFSON

STATE OF FLORIDA)
)SS
COUNTY OF DADE)

FILED
95 JAN -9 PM 3:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I HEREBY CERTIFY that on this day before me personally appeared Gary Woolfson who is personally known to me to be the person described in and who executed the foregoing Acceptance of Designation as Registered Agent and acknowledged before me that he executed same of his voluntary act and deed.

Witness my hand and seal in the County and State last aforesaid this 30 day of December, 1994.



NOTARY PUBLIC, STATE OF FLORIDA

My commission expires:

