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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

430 FOR CORP CC & CUS

SUBJECT: HOME MEDICAL SOLUTIONS INC.

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

GREGORY C. SANDERS

(Name of Person)

HOME MEDICAL SOLUTIONS INC.

(Firm/Company)

2709 GOVERNORS DRIVE

(Address)

HUNTSVILLE AL 35805

(City/State and Zip code)

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For further information concerning this matter, please call:

GREG SANDERS

(Name of Person)

at (256) 533-4061

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STATE OF FLORIDA
TALLAHASSEE

02 AUG 30 AM 9:21

FILED

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☒ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. HOME MEDICAL SOLUTIONS INC.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. ALABAMA 3. 63-1214846
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. NOVEMBER 19, 1998 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 2709 GOVERNORS DRIVE HUNTSVILLE AL 35805
(Principal office address)

2709 GOVERNORS DRIVE HUNTSVILLE AL 35805
(Current mailing address)

8. DURABLE MEDICAL EQUIPMENT, SHOES, ORTHOTICS
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: JIMMY ABIGANDO JR.

Office Address: 8622 PENSACOLA BLVD

PENSACOLA, Florida 32534
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Jimmy V. Abigando
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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02 AUG 30 AM 9:21
TALLAHASSEE FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: GREGORY C. SANDERS

Address: 2709 GOVERNORS DRIVE } OFFICE
HUNTSVILLE AL 35805

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: GREGORY C. SANDERS

Address: 207-6 MARINAWOODS DR } HOME
HUNTSVILLE AL 35803

Vice President: GREGORY C. SANDERS

Address: 207-6 MARINAWOODS DR
HUNTSVILLE AL 35803

Secretary: GREGORY C. SANDERS

Address: 207-6 MARINAWOODS DR HUNTSVILLE AL 35803

Treasurer: GREGORY C. SANDERS

Address: 207-6 MARINAWOODS DR HUNTSVILLE AL 35803

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Gregory C. Sanders
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. GREGORY C. SANDERS - CHAIRMAN, PRESIDENT
(Typed or printed name and capacity of person signing application)

STATE OF ALABAMA

I, Jim Bennett, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

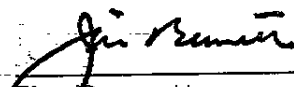
the domestic corporation records on file in this office disclose that Home Medical Solutions, Inc. incorporated in Madison County, Huntsville, Alabama on November 19, 1998. I further certify that the records do not disclose that said Home Medical Solutions, Inc. has been dissolved.



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

August 27, 2002

Date


Jim Bennett

Secretary of State