

Division of Corporations

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Florida Department of State

Division of Corporations Public Access System

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To:

SENTERFITT & EIDSON, P.A. AKERMAN

Account Number 075471001363

(305)374-5600 Phone Fax Number (305) 374-5095

LIMITED LIABILITY COMPANY

E - Z CARE MEDICAL PRODUCTS, LLC

Certificate of Status	0
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ARTICLES OF ORGANIZATION $\Omega \mathbf{E}$ E-Z CARE MEDICAL PRODUCTS, LLC

ARTICLE I: - Name

The name of the Limited Liability Company is: E - Z Care Medical Products, LLC.

ARTICLE II: - Address
The mailing address and street address of the principal office of the Limited Liability Company ís:

> 1725 N.W. 79th Avenue Miami, Florida 33126

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

American Information Services, Inc. One Southeast Third Avenue Suite 2800 Miami, Florida 33131

Having been named as registered agent and to accept service of process for the above stated limited liability company at the 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

American Information Services, Inc.

Registered Agent

Marshall R. Burack, Esq.

Authorized Representative of a Member

Signed and dated this 6th day of February, 2004.