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Florida Department of State
Division of Corporations
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DIVISION OF CORPORATIONS

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Polk City Medical Supplies, LLC

Certificate of Status	1
Certified Copy	0
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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **Polk City Medical Supplies, LLC**

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:Mailing Address:132 Commonwealth AvenueP.O. Box 473Polk City, FL 33868Polk City, FL 33868

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

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

Nancy AdornoName132 Commonwealth Avenue(P.O. Box or Mail Drop Box NOT Acceptable)Polk City, FL 33868(City / State / Zip)

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.

Nancy Adorno

Registered Agent's Signature - Nancy Adorno

ARTICLE IV - Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

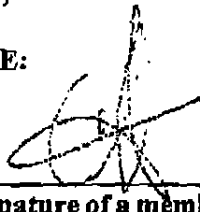
Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:MGRMCarmen Loran- 27 Chandler Drive, Wayne, NJ 07470MGRMEucari Zarzuela- 27 Chandler Drive, Wayne, NJ 07470MGRMNancy Adorno- PO Box 473, Polk City, FL 33868

(Use attachment if necessary)

REQUIRED SIGNATURE:Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Carmen Loran

Typed or printed name of signee

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