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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : CLARA GIRALDO ENROLLED AGENT

Account Number : Ill990000017

: (305)485-9300

Phone Fax Number : (305)485-1098

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

FLORIDA LIMITED LIABILITY CO. CVO MEDICAL EQUIPMENT, LLC.

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

CVO MEDICAL EQUIPMENT, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

CVO MEDICAL EQUIPMENT, LLC.

ARTICLE II - ADDRESS

The principal office of the Limited Liability Company is:

77 SW 72 AVE MIAMI, FL. 33144

The mailing address shall be:

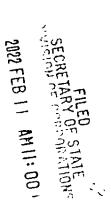
77 SW 72 AVE MIAMI, FL. 33144

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

OMAR FREDY MORENO CABRERA

77 SW 72 AVE
Florida Street address (P.O.BOX NOT acceptable)
MIAMI, FL. 33144
City, State, and 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 605, F.S.

NT'S SIGNATURE

ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

OMAR FREDY MORENO CABRERA 77 SW 72 AVE

MIAMI, FL. 33144

JAIME EUDORO MORENO ANGULO 77 SW 72 AVE

MIAMI, FL. 33144

AMBR

MANAGER

Signature of a member or an authorized representative of a member.

An accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

OMAR FREDY MORENO CABRERA

Typed or printed name of signee