Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: *****70.00 *****70.00 Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$70.00 \$78.75 **378.75** \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee & Certificate of Status & Certified Copy Certified 6 & Certificate of Status ADDITIONAL COPY REQUIRED

NOTE: Please provide the original and one copy of the articles.

Will Wais

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

Business Corporation Act, hereby adopts the following Articles of Incorporation.
ARTICLE I NAME
The name of the corporation shall be:
Grant Medical, Inc.
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be
1382 Pawner Point Court
ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
i O O
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial register.
Janet L. Grant
932 Summerbrooke Drive, Tallahassee, FL. 32312
BALLUL V INCORPORATOR
the name and address of the incorporator to these Articles of Incorporation are:
Janet L-Grant
932 Summerbrooke Drive Foo 8
Tallahassee, FL 32812
_ Amet Coart
Signature/Incorporator Date
LORIDA CONTRACTOR OF THE CONTR

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation 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 obligations of my position as registered agent

Signature/Registered Agent

3-1-00

Date