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(Requestor's Name)	D CME.112
000 PONCE DE LEON BLV (Address)	
ORAL GABLES, FLORIDA (City, State, Zip)	33134
·	)444-4977 OFFICE USE ONLY
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NEW FILINGS	AMENDMENTS 10 AMENDMENTS
Profit	Amendment /
NonProfit	Resignation of R.A., Officer/Director
Limited Liability	Change of Registered Agent
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Other	Merger
	REGISTRATION
OTHER FILNGS	573 ·
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Annual Report	573 ·

Other

Examiner's Initials

#### ARTICLES OF INCORPORATION

OF

### C.I.G.Y. MEDICAL EQUIPMENT, INC.

ON HAR 16 PH 3: 08
SECRETARY OF STATE
TALLAHASSEE FLORIDA

#### ARTICLE I - NAME

The name of this corporation is

C.I.G.Y. MEDICAL EQUIPMENT, INC.

#### ARTICLE II - DURATION

This corporation shall have perpetual existence, unless sooner dissolved in accordance with the laws of the State of Florida.

## ARTICLE III - PURPOSE

This corporation is organized for the purpose of transacting any and all business permitted under the laws of the United States and of the State of Florida.

## ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue one hundred (100) shares of no par value common stock, which shall be designated "Common Stock".

#### ARTICLE V - PREEMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

# 

## ARTICLE VIII - INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THE STATE OF FLORIDA, NAMING AGENT UPON WHOM SERVICE OF PROCESS MAY BE EFFECTIVE

In compliance with section 607.034 of the Florida Statutes,

the following is submitted: C.I.G.Y. MEDICAL EQUIPMENT, INC.

desiring to organize or qualify under the laws of the State

of Florida, with its principal place of business in the City

Of Miami, County of Dade, State of Florida, has named

AGUSTIN L. GONZALEZ

located at

3383 N.W. 7 ST., Suite 108

City of Miami, County of Dade

State of Florida as its agent to accept service of process within

the State of Florida.

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#### ACKNOWLEDGMENT

Having been named to accept service of process for the above mentioned corporation, at the place designated in this Certificate, I hereby agree to act in this capacity, and further agree to comply with the provisions of all Statues relative to the proper and complete performance of my duties.

Resident and Registered Agent

## ARTICLE IX - INCORPORATOR

The name(s) and address(es) of the incorporators and their respective shares of these articles is (are):

NAME

SHARES

ADDRESS

AGUSTIN L. GONZALEZ 100 3383 N.W. 7 ST., Suite 108 Miami, Fl. 33125

IN WITNESS WHEREOF, the undersigned subscriber(s) has (have)

executed these articles of incorporation this 13<sup>th</sup> day of

March ,2000.

AGUSTIN L. GONZELAGZ P. 32.