

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

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SUBJECT:

AMA HOME CARE CORP.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

\$70.00		\$78.75	□ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate or
			Status
		ADDITIONAL CO	
FROM	: MARIO DEL MAZO		
TROM		Printed or typed)	
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	1011 OTT O Channel		جَ
	1844 SW 8 Street		Ļ

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

paytime Telephone number

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

AMA HOME CARE CORP

ARTICLE II PRINCIPAL OFFICE

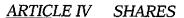
The principal place of business/mailing address is:

1844 SW 8 Street Miami, Florida 33135

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Medical Equipment sales, rental, leasing.



The number of shares of stock is:

100 shares

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Mario del Mazo-Adler

ARTICLE VI REGISTERED AGENT

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

Mario del Mazo-Adler

1844 SW 8 Street

Miami, Florida 33135

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Mario del Mazo-Adler 1844 SW 8 Street

Miami, Florida 33135

	5-11-2000	
Signature/Registered Agent	Date	
	5-11-2000	
Signature/Incorporator	Date	