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

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SUBJECT: KP Respiratory Services Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an origin	al and one(1) copy of the articl	es of incorporation and a	check for:	_
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	00 JUL 21 T
FROM: Kimberly Johns Name (Printed or typed)			PM 4: 50	
P.O. Box 16264 Address				
	Chearwoter F	7. 33766 State & Zip		
	727 - 644. Daytime Tel	ephone number		

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

G-1/25/00

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:

KP Respiratory Services, Inc.

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

00 JUL 21 PM 4:50

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2406 Hazelwood lane / Clearwater, Fl. 33763

P.O. Box 16264

Clearwater, Fl. 33766

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Pulmonary/Respiratory Evaluations

ARTICLE IV SHARES

The number of shares of stock is:

7500

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Kimberly Johns

Patricia A. Scotti

2406 Hazelwood Lane

808 Franklin Circle

Clearwater, Fl. 33763

Palm Harbor, Fl. 34683

ARTICLE VI REGISTERED AGENT

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

Kimberly Johns 2406 Hazelwood Lane Clearwater, Fl. 33763

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Kimberly Johns

2406 Hazelwood Lane

Clearwater, Fl. 33763

Signature/Registered Agent

Signature/Incorporato

Date /

Date /