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September 20, 2000

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

600003403766--7  
-09/25/00--01152--007  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

RE: TROPICAL MEDICAL EXPRESS SUPPLY, INC.

To Whom It May Concern:

Enclosed is an original and one copy of the Articles of Incorporation and a Designation and Acceptance of Registered Agent for a Florida Corporation.

Please provide a certified copy of these articles in the enclosed self addressed stamped envelope.

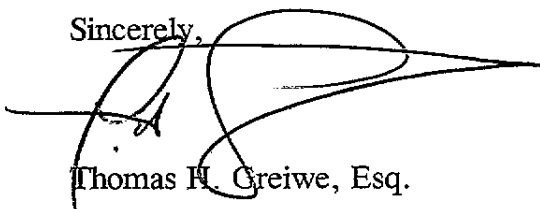
A check for \$78.75 made payable to the Department of State is enclosed. This represents payment for:

Articles of Incorporation  
Designation of and Acceptance by a Registered Agent  
Certified copy of Articles of Incorporation

Should you have any questions or concerns regarding this matter, please do not hesitate to contact my office.

With best regards, I remain,

Sincerely,



Thomas H. Greiwe, Esq.

THG/kh  
encl.

FILED  
00 SEP 25 PM 3:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9-27  
WC

**ARTICLES OF INCORPORATION**  
**OF**  
**TROPICAL MEDICAL EXPRESS SUPPLY, INC.**

FILED  
00 SEP 25 PM 3:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I. CORPORATE NAME.**

The name of this corporation is TROPICAL MEDICAL EXPRESS SUPPLY, INC.

**ARTICLE II. PRINCIPAL OFFICE.**

The principal place of business and mailing address of this corporation are 3935 Enterprise Ave., Naples, Florida 34104.

**ARTICLE III. CAPITAL STOCK.**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 100.

**ARTICLE IV. INITIAL REGISTERED AGENT AND OFFICE.**

The name and address of the initial registered agent are Rusti Wolny, 3935 Enterprise Ave., Naples, Florida 34104.

**ARTICLE V. INCORPORATORS.**

The name and street address of the incorporator to these articles of incorporation is:

Rusti Wolny  
3935 Enterprise Ave.  
Naples, Florida 34104

The undersigned executed these articles of incorporation on Sept 13, 2000  
2000.

Rusti Wolny Inc  
Rusti Wolny, Incorporator

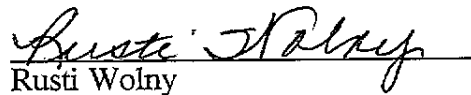
**DESIGNATION AND ACCEPTANCE OF REGISTERED AGENT  
FOR A FLORIDA CORPORATION**

Pursuant to the provisions of F.S. 607.0501, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent in the State of Florida.

1. The name of the corporation is TROPICAL MEDICAL EXPRESS SUPPLY, INC.
2. The name of the registered agent is Rusti Wolny.
3. The address of the registered agent/registered office is 3935 Enterprise Ave., Naples, Florida 34104.

**ACCEPTANCE**

Having been named as registered agent and designated to accept service of process for the above corporation, 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.

  
Rusti Wolny

Date: Sept 13, 2000.