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FILED  
01 JAN 18 PM 1:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DATE JANUARY 16, 2001

SECRETARY OF STATE  
CORPORATE DIVISION  
STATE OF FLORIDA  
P.O. BOX 6327  
TALLAHASSEE, FLORIDA 32314

900003553749--8  
-01/18/01--01054--006  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

RE: MEDICAL EQUIPMENT OF MIAMI, INC., INC.

GENTLEMEN:

ENCLOSED HERewith ARE THE ARTICLES OF INCORPORATION TOGETHER WITH  
A COPY OF SAID ARTICLES FOR:


MEDICAL EQUIPMENT OF MIAMI, INC.  
NAME OF CORPORATION

OUR CHECK IN THE AMOUNT OF \$78.75 INCLUDES THE FOLLOWING:

FILING FEE  
CHARTER TAX  
REGISTERED AGENT  
CERTIFIED COPY

TOTAL \$78.75

RESPECTFULLY SUBMITTED,

  
(LESLIE L. VALDES)  
INDIVIDUAL'S NAME

MEDICAL EQUIPMEN T OF MIAMI, INC.  
NAME OF CORPORATION

F. CHESSEN JAN 19 2000

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**CERTIFICATE OF INCORPORATION**  
**-OF-**

**MEDICAL EQUIPMENT OF MIAMI, INC.**

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*WE, THE UNDERSIGNED, hereby associate ourselves together for the purpose of becoming a corporation under the laws of the State of Florida, by and under the Provisions of the Statutes of the said State of Florida.*

**ARTICLE I**

*The name of this Corporation shall be:*

**MEDICAL EQUIPMENT OF MIAMI, INC.**

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**ARTICLE II**

*The Corporation may engage in any activity or business permitted under the laws of the United States and of the State of Florida.*

**ARTICLE III**

*The maximum number of shares of capital stock that this corporation is authorized to have outstanding at any time is FIVE HUNDRED (500) shares of common stock, having a par value of ONE (\$1.00) DOLLAR per share.*

**ARTICLE IV**

*The amount of capital with which this corporation shall begin business will be the sum of not less than five hundred (\$500.00) DOLLARS.*

**ARTICLE V**

*This Corporation shall exist perpetually unless sooner dissolved according to law.*

**ARTICLE VI**

*The initial street address of the principal office of the corporation shall be:*

**1830 N.W. 42nd ROAD, MIAMI, FL. 33125**

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ARTICLE VII

*The number of Directors of this Corporation shall be at least (1) One and no more than five.*


ARTICLE VIII

*The names and street addresses of the members of the first Board of Directors of this Corporation are as follows:*

<u>LESLIE L. VALDES</u>	<u>11273 S.W. 29th STREET</u>
<u></u>	<u>MIAMI, FL. 33165</u>
<u></u>	<u></u>
<u></u>	<u></u>

ARTICLE IX

*The names and street addresses of the persons signing these Articles of Incorporation as subscribers is as follows:*

 <u>SIGNATURE OF INCORPORATOR</u>	<u>11273 S.W. 29th STREET, MIAMI, FL. 33165</u> <u>ADDRESS</u>
<u>SIGNATURE</u>	<u>SAME AS ABOVE</u> <u>ADDRESS</u>

ARTICLE X

*The corporate existence of this Corporation shall begin on the date on the Articles of Incorporation that are filed on record with the State.*

**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESSING WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.**

**IN COMPLIANCE WITH SECITON 607.325 FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:**

**FIRST THAT** MEDICAL EQUIPMENT OF MIAMI, INC.  
NAME OF CORPORATION

**WITH ITS PLACE OF BUSINESS AT** 1830 N.W. 42nd ROAD, MIAMI, FL. 33125  
ADDRESS, CITY

**HAS NAMED** LESLIE L. VALDES  
NAME OF REGISTERED AGENT

**LOCATED AT** 11273 S.W. 29th STREET  
STREET ADDRESS AND # OF BUILDING

**CITY OF** MIAMI (331650), **STATE OF FL., AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FL.**

**SIGNATURE**  \_\_\_\_\_  
CORPORATE OFFICER

**TITLE** PRESIDENT

**DATE** JANUARY 16, 2001

Having been named to accept service of process for the above state corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of Section 607.325 of the Fl. Statutes.

**SIGNATURE**  \_\_\_\_\_  
REGISTERED AGENT

**DATE** JANUARY 16, 2001

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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