### Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

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Account Name : EMPIRE CORFORATE KIT COMPANY

Account Number: 072450003255 Phone : (305)634-3694

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## FLORIDA PROFIT CORPORATION OR P.A.

MARTIN MEDICAL EQUIPMENT, INC.

Because and the second	
Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

#### ARTICLES OF INCORPORATION

# 01000067982

#### MARTIN MEDICAL EQUIPMENT, INC.

<u>Of</u>

The undersigned hereby petition for the formation of a corporation ur the laws of the State of Florida, with and under the following Chafter

#### ARTICLE I

The name of the corporation shall be:

#### MARTIN MEDICAL EQUIPMENT, INC.

#### ARTICLE II

The general nature of the business to be transacted shall be sales and rental of medical equipment and other general business or otherwise engage in any activity or business permitted under the laws of the United States of America and this State.

#### ARTICLE III

The capital stock of this corporation shall consist of 1000 shares of common stock of \$1.00 par value each, all or part of said stock to be issued from time to time as may be determined by the Board of Directors. On dissolution or liquidation of the corporation the holders of the stock shall be entitled to distribution rateable as their holdings may appear upon the stock record of the corporation.

#### ARTICLE IV

This corporation shall have perpetual existence.

#### ARTICLE V

The business and property of this corporation shall be managed by a Board of Directors consisting of one (1) or more members, as may be provided By-

laws. 0100006798

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901 N. W. 22ND AVENUE

FL. BAR NO.: 694-290

MIAMI, FL 33125

(305) 649.7344

84

#### ARTICLE VI

The names and post office addresses of the first Board of Directors of this corporation, who, subject to the provisions of this Certificate, the By-laws of this corporation, and the laws of the State of Florida, shall hold office for the first year of this corporation's existence or until their successors are elected and have qualified, are as follows:

MARIO MARTIN

President

Residing at:

10825 S. W. 86TH STREET, #18 MTAMI, FL 33173

#### ARTICLE VII

The Registered Agent for the purpose of complying with Florida law shall be MARIO MARTIN and the registered agent's office of this corporation shall be 10825 S. W. 86TH STREET, #18, MIAMI, FL 33173

#### ARTICLE VIII

The post office address of the principal office of this corporation until otherwise determined by the stockholders or the Board of Directors shall be 10825 S. W. 86TH STREET, #18, MIAMI, FL 33173 and branch offices may be maintained at such places in the State of Florida, and in the United States of America and in foreign countries as may from time to time be authorized by the stockholders or Board of directors of this Corporation.

#### ARTICLE IX

The name and post office address of the Subscriber of this Certificate of Incorporation and the number of shares of the capital stock of this corporation subscribed by the said Subscriber of this Certificate of Incorporation are as follows:

NAME

**ADDRESS** 

NO. OF SHARES

MARIO MARTIN

10825 S. W. 86TH STREET, #18

1000

MIAMI, FL 33173

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#### ARTICLE X

The regulations of the conduct of the affairs of this corporation, the issuance of certificate of capital stock of this corporation, the voting rights of the holders of the shares of the capital stock of this corporation, are vested in the shareholders.

IN WITNESS WHEREOF, the undersigned Subscriber has hereunto set their hand and seal in the City of Miami, County of Dade, State of Florida, this 22nd day of May, 2001.

SWORN TO AND SUBSCRIBED before me this 22nd day of May, 2001.

MARIO MARPIN, PRESIDENT

STATE OF FLORIDA

COUNTY OF DADE

I HEREBY CERTIFY that on this day personally appeared before me, the undersigned authority, MARIO MARTIN, known to be the person who executed the foregoing Certificate of Incorporation of MARTIN MEDICAL EQUIPMENT, INC., and he acknowledged before me that he has executed the same for the purpose therein set forth. The foregoing instrument was acknowledged before me by MARIO MARTIN, who produced identification.

SWORN TO AND SUBSCRIBED before me on this 2nd day of May, 2001,

in Miami, Florida.

work Public, State of Florida

MY COMMISSION EXPIRES:

COMMISSION DU, DEC 152004 WY COMMISSION DU, DEC 152004

I ACCEPT DESIGNATION AS REGISTERED AGENT OF THIS CORPORATION AND I AM FAMILIAR WITH THE DUTIES REQUIRED OF ME

**H** 01000067982

MARIO MARTIN

Prepared by:

GERALD T. ENGEL, 250. 901 N. W. 22ND AVENUE MIAMI, FL. 33125 (305) 649-7344

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DIVISION OF CORPORATIONS

ON MAY 22 PM 3: 48