TRANSMITTAL LETTER

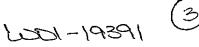
P0100087099 Department of State

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

SUBJECT:	TEE PEE	FIORID	A SAIE	SIN	JC <u>.</u>	
			2 000045 4 -08/20/01 *****87.	12312 -01091 50 *****	-002 +87.50	
Enclosed are an original and one (1) copy of the articles 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			
FROM:	Tonya Mo	Hews Printed or typed)		-	.• .•	
	13500 5W	9th pla	SECRETATALLAHA	01 SEP	- -	
	DAVIE FI	333 State & Zip	3.5	-5 M		
	954.658.	4090		ယ္ ယ ဇာ		

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

G. BULLOCK SEP 0 5 2001





FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 21, 2001

TONYA MATHEWS 13500 SW 9TH PLACE DAVIE, FL 33325

SUBJECT: TEE-PEE FLORIDA SALES, INC.

Ref. Number: W01000019391

We have received your document for TEE-PEE FLORIDA SALES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6926.

Gina Bullock Document Specialist New Filing Section

Letter Number: 701A00047736

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: TEE - PEE FIORI DA SAIES FOC.	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 13500 5 W 9th place DAVIE FLORIDA, 33325 ARTICLE III PURPOSE The purpose for which the corporation is organized is: SALES, MEDICAL EQUIPMENT	aneri
ARTICLE IV SHARES The number of shares of stock is: $50\%50\%50\%50\%50\%50\%50\%50\%50\%50\%50\%50\%50\%5$	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s):	
Tonya Mathews 13500 Sw 9th place DAVIE Pl 33325 ARTICLE VI REGISTERED AGENT The name and Prisident agent is: Pamela- Roedev 8500 Old Country MA DAVIE Fl. 33328	Noe
13500 Sw 912 place	-
DAULE FI 33325 ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is: TONYA MATHEWS 13500 SW 9th place DAVIE FL 33325	

Signature/Registered Agent Signature/Incorporator Signature/Incorporator Signature/Incorporator	
Pamela Roeder 8/10/01	