-ONL) APOLATION LING SHRV CE **3320 S.W. 87 AVENUE** MIAMI, FLORIDA (305)552-5973 TERESA ROMAN (TALLAHASSEE REPRESENTATIVE) OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): EQUIPMENTING. (Corporation Name) (Document #) (Corporation Name) (Document #) (Document #) (Corporation Name) Walk in Pick up time Certified Copy Certificate of Status Mail out Will wait Photocopy AMENDMENTS NEW FILINGS Amendment Profit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FILINGS **OUALIER ATION** Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark

Other

Examiner's Initials

ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adoptes the following Articles of Incorporation.

02 JAN 18 PM 12: 37 SECRETARY OF STATE OPTION

ARTICLE I - NAME

The name of the corporation shall be:

Duality Choice Medical Equipment, INC.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

11117 W OKEEHO BEE Rd # 106 Hialeah SARDENS FL. 33018 ARTICLE III - SHARES

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

1000

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GEAZZIELLA ALVAREZ. 11117 W OKEECHOBEE RD #106 HiALEAH. GARDENS FL. 33018.

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

GRAZZIELA HUAREZ. 11117 W OKEECHOBEE RD # 106 HIALEAN GARDENS FL 33018. The undersigned incorporator has executed these Articles of Incorporation this OL_day of
ARTICLE VI- DIRECTOR(S)
The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are): GRAZZIELLA ALVALEZ (RESIDENT) IIII7 W OKEECHOBEE RD # 106 HIALEAH GARDENS FL. 33018 HADIA JULIA CUESTA. (VICE PLESIDED) CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent. Registered Agent Signature