OFFICE U <u>US CORPORATE FILING SERVICE</u> 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): (Corporation Name) (Document #) (Corporation Name) (Document #1 (Document #) (Corporation Name) Pick up time 2.00 Certified Copy Walk in Certificate of Status Will wait Photocopy Mail out 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 FILNGS *QUALIFICATION* Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other Examiner's Initials

ARTICLES OF INCORPORATION

OF

H & A MEDICAL SUPPLIES, INC.

02 JAN 23 PM 1:25
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

ARTICLE I NAME

The name of the Corporation shall be:

H & A MEDICAL SUPPLIES, INC.

ARTICLE II PRINCIPAL OFFICE

This principal place of business and mailing address of this corporation shall be:

8801 NW. 36TH STREET, SUITE # 100, MTAMI, FL 33166.

ARTICLE III CAPITAL STOCK

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

500 SHARES AT \$ 1.00 EACH.

ADDRESS:

ARTICLE IV-INITIAL REGISTERED AGENT AND

The name and address of the initial registered Agent is:

HIVELL ANGULO 5560 NW. 107 AVE. # 1006 MIAMI,FL 33178.

ARTICLE V-INCORPORATOR (S)

The name(s) and street address(es) of the incorporator(s) to these articles of incorporation is(are):

HIVELL ANGULO.-DPVST.-5560 NW. 107 AVE. # 1006, MIAMI, FL 33178.- 500 SHARES

The undersigned has (have) executed these Articles of Incorporation this:

Signature/Title
Signature/Title
Signature/Title
Signature/Title

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida statutes, 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: H & A MEDICAL SUPPLIES, INC.

2The name and address of the registered agent and office is:
HIVELL ANGULO
(NAME)
5560 NW. 107 AVE. # 1006
P.O. Box not acceptable .
MIAMT,FL 33178
(CITY/STATE/ZIP
signature/ / /
(Corporate Officer) TITLE PRESIDENT
DATE 1-21-2002
Having been named as Registered Agent and to accept service of process for the above stated corporation at the 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 relating to the proper and complete performance of my duties, and familiar with and accept the obligations of my position, as Registered Agent. SIGNATURE DATE 1-21-2002