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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 205-0381

From: Account Name : BUSINESS WORLD TRANSACTIONS, INC.  
Account Number : 104512000707  
Phone : (303) 266-4080  
Fax Number : (305) 264-0232

FLORIDA PROFIT CORPORATION OR P.A.

USA MEDICAL SUPPLY, INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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TALLAHASSEE, FLORIDA  
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**ARTICLES OF INCORPORATION**

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

**ARTICLE I**

**NAME**

The name of the corporation shall be USA MEDICAL SUPPLY, INC.

**ARTICLE II**

**PRINCIPAL OFFICE**

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

15490 S.W. 82 LN # 111  
MIAMI, FL. 33193

**ARTICLE III**

**SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: Ten Thousand (10,000) shares of One Dollar (\$1.00) par value common stock, which shall be designated  $\text{\textcircled{C}}$ COMMON SHARES.  $\text{\textcircled{R}}$

**ARTICLE IV**

**INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

ALBERTO MASCARO JR  
15490 S.W. 82 LN # 111  
MIAMI, FL. 33193

Prepared by: ALBERTO MASCARO JR  
15490 S.W. 82 LN # 111  
MIAMI, FL. 33193  
(305) 382-4298

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**ARTICLE V  
INCORPORATOR(S)**

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

ALBERTO MASCARO JR  
15490 S.W. 82 LN # 111  
MIAMI, FL. 33193


**DIRECTOR & PRESIDENT**

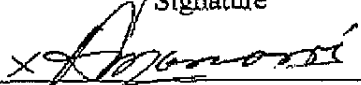
ALBERTO MASCARO SR  
2161 S.W. 14 TERR # 1  
MIAMI, FL. 33145

**DIRECTOR & VICE-PRESIDENT**

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

\_\_\_\_ day of February, 2002

  
\_\_\_\_\_  
Signature

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

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**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, 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: USA MEDICAL SUPPLY, INC.

2. The name and address of the registered agent and office is:

ALBERTO MASCARO JR  
15490 S.W. 82 LN # 111  
MIAMI, FL. 33193

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*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 I am familiar with and accept the obligations of my position as registered agent.*

  
\_\_\_\_\_  
(SIGNATURE)

2/4/02  
(DATE)

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