3320 S.W. 87 AVENUE 300005043483--MIAMI, FLORIDA (305)552-5973 TERESA ROMAN (TALLAHASSEE REPRESENTATIVE) OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): 1. EXCLUSIVE ORTHOPEDIC STORE, INC. (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time _ Certified Copy Certificate of Status Mail out Will wait Photocopy AMENDMENTS NEW FILINGS Amendment ₽rofit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION! OTHER FILINGS QUALIFICATION 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 adopt (s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

EXCLUSIVE ORTHOPEDIC STORE, INC

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ARTICLE II - PRINCIPAL OFFICE

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

486 EAST 49 STREET HIEALEAH, FL, 33013

ARTICLE III- SHARES

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

100

ARTICLES IV- INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ODELAISY BAUZA 486 EAST 49 STREET HIALEAH, FL 33013

ARTICLE V - INCORPORATOR

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

ODEALISY BAUZA 486 EAST 49 STREET HIALEAH, FL 33013

7	The und	ersigned inco	rporator has execu	ted these Artic	les of Incorpor	ation this
n	04	day of	04MARCH	20 <u>_02</u>		
			(fair)			
			Signa	ature		-

ARTICLE VI - DIRECTOR (S)

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

ODELAISY BAUZA BRESIDENT
486 EAST 49 STREET
HIALEAH, FL 33013
OLINDA BAUZA VICE_ PRESIDENT
11175 NW 87 PLACE, hialeah GARDENS, FL33018

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, I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature