TRANSMITTAL ICHTER STATE OF State

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

SUBJECT:	(PROPOSED CORPORA)	EDICAC TENAME-MUST INCLI	*	ENT, INC
Enclosed are an orig	inal and one (1) copy of the arti		20000550 -05/13/02 *****87.50 I a check for:	11095nin
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	-	·
FROM:	7989 CHU	OHAMON (Printed or typed) CA VISTA Address ATOM FC	Cc 33433	SELEN OF CORPORATIONS OF MAY 13 PM 5: 30
-	541- 3	State & Zip 662 - 960 elephone number		. -

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



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:
The name of the corporation shall be: EXPORT MEDICAL EQUIPMENT, NC
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 7979 CHULA VISTA CR, BOCA RATON, FL 3343
ARTICLE III PURPOSE The purpose for which the corporation is organized is: $E \times lort MEDICAL EDUIDMENT R TOODS$
ARTICLE IV SHARES The number of shares of stock is: 1000
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): ESTHER OHAYON - PRESIDENT 7989 CHULA VISTA GR BOCA RATON, FC 33433
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: EST HER OHAYON 7989 CHULA VISTA CA BOCA RATON: FE 33433
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: ESTHER OHAYON 7969 CHULA VISTA CR BOCA RATON: FR 33433
POCATION 1
Elope 4/30/02
Signature/Registered Agent Date 4/30/02
Signature/Incorporator Date