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OFFICE USE ONLY (Document #) EXPRESS CORPORATE FILING SERVICE INC. (Requestor's Name) 1000 PONCE DE LEON BLVD. STE: 101 (Address) CORAL GABLES, FL 33134 305-444-4994 (City, State, Zip) (Phone #) OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): DICAL SUPPLY, INC. (Corporation Name) (Document #) (Document #) (Corporation Name) (Document #) Certified Copy Walk in ` Pick up time Mail out Will wait Photocopy Certificate of Status AMENDMENTS NEW FILINGS Profit Amendment Resignation of R.A., Officer/Director NonProfit Limited Liability Change of Registered Agent Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign ****157.50 *****78.75 Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark 25-31-02

Other

Examiner's Initials

ARTICLES OF INCORPORATION . FOR

A + MEDICAL SUPPLY, INC.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

A + MEDICAL SUPPLY, INC.

ARTICLE II PRINCIPAL OFFICE

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

7750 W 24 AVE BAY-18 HIALEAH, FL 33016

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have shall be:

100

ARTICLE IV REGISTERED AGENT

The name and Florida street address of the initial registered agent shall be:

MELISA LLAURADO 7750 W 24 AVE BAY-18 HIALEAH, FL 33016

ARTICLE V INCORPORATOR

The name and address of the incorporator(s) to these Articles of Incorporation shall be:

MELISA LLAURADO 7750 W 24 AVE BAY-18 HIALEAH, FL 33016

Signature of Incorporator

Date

Date

ARTICLE VI DIRECTOR(S)/OFFICER(S)

The name(s) and address(es) of the Director(s)/Officer(s) shall be:

MELISA LLAURADO (P) 7750 W 24 AVE BAY-18 HIALEAH, FL 33016

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the articles, 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

Date