

TRANSMITTAL LETTER

P02000077959

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

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-07/18/02--01004--005
*****70.00 *****70.80

SUBJECT: Vitality Medical, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

<input checked="" type="checkbox"/> \$70.00 Filing Fee	<input type="checkbox"/> \$78.75 Filing Fee & Certificate	<input type="checkbox"/> \$122.50 Filing Fee & Certified Copy	<input type="checkbox"/> \$131.25 Filing Fee, Certified Copy & Certificate
Additional Copy Required			

SECRET
TALLAHASSEE, FLORIDA

2002 JUL 17 AM 9:12

FILED

FROM: Felix Alvarez
Name (printed or typed)

800 E. Cypress Creek Road, Suite 204
Address

Ft. Lauderdale, FL 33334
City, State & Zip

(407) 689-6666
Daytime Telephone number

68-18-02
J

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

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:

Vitality Medical, Inc.

ARTICLE II PRINCIPAL OFFICE

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

800 E. Cypress Creek Road
Suite 204
Ft. Lauderdale, FL 33334

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Felix Alvarez
800 E. Cypress Creek Road
Suite 204
Ft. Lauderdale, FL 33334

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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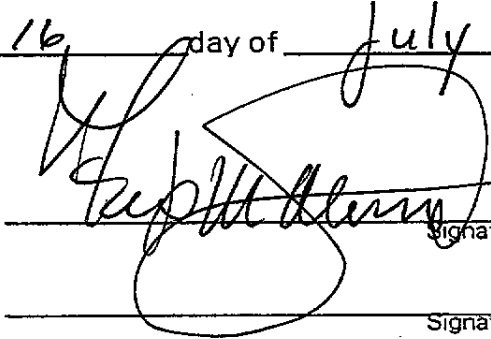
FILED

ARTICLE V INCORPORATOR(S)

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

Felix Alvarez
800 E. Cypress Creek Road
Suite 204
Ft. Lauderdale, FL 33334

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

16 day of July, 2002


Signature

Signature

Signature

**Articles of Incorporation
Filing Fee - \$35**

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 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: Vitality Medical, Inc.

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

Felix Alvarez
(Name)
800 E. Cypress Creek Road, Suite 204
(P.O. Box or Mail Drop Box NOT acceptable)
Ft. Lauderdale, FL 33334
(City/State/Zip)

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TALLAHASSEE, FLORIDA

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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)

(Date)