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TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)	PH 12: 27
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CORPORATION NAME(S) & DOCUMENT NUMB	BER(S) (if known):
1. F&MMEDICAL EQUIPMENT, INC.	
2. (Cosperation Name)	(Document #)
3. (Corporation Name)	(Document #)
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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:

F & M MEDICAL EQUIPMENT, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 JUL 24 PH 12: 27

ARTICLE II - PRINCIPAL OFFICE

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

39 NW. 166TH ST.STE 4 MIAMI,FL. 33169

ARTICLE III -SHARES

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

500 SHARES AT \$ 1.00 EACH.

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

FRANCISCO MORALES 17910 NW. 48 CT OPA LOCKA, FL. 33055

ARTICLE V - INCORPORATOR

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

FRANCISCO MORALES.-17910 NW.48 CT, OPA LOCKA, FL 33055.

The undersigned incorporator has executed these Articles of Incorporation this _23_ day of __ULY_____ 20_02

Signature

ARTICLE VI- DIRECTOR(S)

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

FRANCISCO MORALES.-17910 NW. 48 CT, OPA LOCKA, FL 33055.

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

Registeréd Agent Signature