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| MIAMI, FLORIDA (305)552-5973 | TARY OF D |
| TERESA ROMAN (TALLAHASSEE REPRI | SERVICE SERVICE SERVICE SECRETARY OF STATE ALL AHASSEE, FLORIT ESENTATIVE) |
| | OFFICE USIG ONLY |
| CORPORATION NAME(s) & DOCU | UMENT NUMBER (S) (IT house) |
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| 2. (Corporation Name) | |
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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 $adopt(s) \approx 10^{-5}$ the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

LOREN MEdiCAL SUPPLY INE

ARTICLE II - PRINCIPAL OFFICE

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

19647 NW 62 AVE MIAMI FIL = 33015

<u>ARTICLE III -SHARES</u>

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:

LORENZO BRANTA

19647 NW 62AV

MIAMIO FL 33015

<u> ARTICLE V – INCORPORATOR</u>

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

The undersigned incorporator has executed these Articles of Incorporation this 7 day of 31 2002

Signature

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ARTICLE VI- DIRECTOR(S)

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

JORENZO BRANA (PRESIDENT)

19647 NW 62 AVE

MIAMIO FIL 33015

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.

Registered Agent Signature