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| OFFICE USE ONLY[DOCUMENT #] | SECRETARY OF STATE TALLAHASSEE, FLORIDA |
| LAZARUS CORPORATE FILING SERVICE | |
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| MIANI, FLORIDA (305)552-597J | |
| TERESA ROMAN (TALLAHASSEE REPRESENTATIVE | <u>)</u> |
| | OLLICE D24 OHFA |
| 1. PRIZMEDICALEO | IBER(S) (If homen): AUI PMENT INC (Becommond &) |
| (Corporation Harry) 3. (Corporation Harry) | 5000072820959 |
| 4. (Corporation Name) | ************************************** |
| Walk in Rick up time 2 00 | (Document #) Certified Copy |
| Mail out Will wait Photocopy | Certificate of Status |
| Profit Amendment | |
| Annual Report . REGISTRATIO |)N/861)N 464 |
| Fictitious Name Foreign | |
| Name Reservation Limited Partners Reinstatement | hip |

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SECRETARI OF STATE TALLAHASSEE, FLORIDA

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: ARIZ MEDICAL EQUIPMENT INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 3552 N.W. 15 St Miami, F1 33125

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: Five (500) hundred shares one dollar (1) per value common stock

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Raquel Artiz 3552 N.W. 15 St Miami, F1 33125

ARTICLE V INCORPORATOR(S)

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

Raquel Artiz 3552 n.W. 15 St Miami, F1 33125

ARTICLE VI DIRECTOR(S)

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

Raquel Artiz (president) 3552 N.W.15 St Miami, F1 33125

| The undersigned incorporator(Incorporation this21 | s) has(have) executed these Arti day ofhugust, | cles of 2002 |
|---|---|-----------------|
| | Mal | |
| | Signature | |
| | Signature | . |
| | Signature | |

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 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.

| tered agent a | nd offic | e is: | |
|---------------|----------|-------|-----|
| | | - | |
| ME) | | | |
| | | | |
| ACCEPTABL | E) | | |
| - | | | |
| | ME) | | ME) |

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____08/21/02