Florida Department of State

Division of Corporations **Public Access System**

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone

: (305)634-3694

Fax Number

: (305)633-9696

FLORIDA PROFIT CORPORATION OR P.A.

opimed, inc

Certificate of Status	0
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ARTICLES OF INCORPORATION

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<u>OF</u>

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:

OPIMED, INC.

ARTICLE I) PRINCIPAL OFFICE

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

Place of Business: 3661 South Miami Ave., Ste 402 Miami, FL

Mailing Address: 3663 SW 8th Street, Ste 210 Miami, FL

CAPITAL STOCK ARTICLE III

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

1000 SHARES @ \$1.00 PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Marcos A. Guerra 3663 SW 8th Street, Ste 210 Miami, FL 33135

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ARTICLE V INCORPORATOR(S)

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

Enrique L. Gomez, Director & President - Owner of 250 Shares. Juan R. de Dianous, Director & Vice President - Owner of 250 Shares. Leonel Lacayo, Director & Secretary - Owner of 250 Shares. Mario Perez Balladares, Director & Treasurer - Owner of 250 Shares.

ARTICLE VI PURPOSE

The main purpose of this Corporation is to performed the service of Medical Consultants.

24th	day ofSeptember	Articles of Incorpo	1002	
***		Dung		
	Qo	Signature/Title	ez, Presiden	it
		Signature/Litte	Dianous, V.	President
		Signature/Title		
STATE OF FLO	DRIDA			
COUNTY OF _ DA	ADE	_		
THE FOREGOING	INSTRUMENT WAS ACKNOON OF September	NOWLEDGED AND	SWORN TO BE	FORE
		<u>OPIMED, INC.</u>		
Lian R. de	Dianous	7 <u>. Titto </u>	-	

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the tate 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: OPIMED, INC.
2. The name and address of the registered agent and office is:
Marcos A. Guerra (NAME)
3663 SW 8th Street, Ste.210 (P.O. BOX NOT ACCEPTABLE)
Miami, Florida 33135
(CITY/\$TATE/ZIP)
SIGNATURE (corporate officer) Enrique Gomez TITLE President DATE 09/24/02 PARATION DATE 09/24/02
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 MATCOS A. GUETTA DATE 09/24/02

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