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LAZARUS CORPORATE FILIN 3320 S.W. 87 AVENUE MIAMI, FLORIDA (305)552-5973 TERESA ROMAN (TALLAHASSEE RE	10 PM I2: 33
1. Sb S HEALTH   (Corporation Name)   3	OFFICE USE ONLY DCUMENT NUMBER(S) (if known): I AND MEDICAL SUPPLIES INC. (Document #) (Document #) (Document #) (Document #) Certified Copy
Mail out Will wait      NEW FILINGS     Prolit     NonProlit     Limited Liability     Domestication     Other     OTHER FILINGS     Annual Report     Fictitious Name     Name Reservation	Photocopy   Certificate of Status     ODODOBS3104000     -10/10/0201071003     AMENUMENTS     Amendment     Resignation of R.A., Officer/Director     Change of Registered Agent     Dissolution/Withdrawal     Merger     Recifist RATION/ OUALIFICATION     Foreign     Limited Partnership     Reinstatement     Trademark     Other

# **ÀRTICLES OF INCORPORATION**

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of incorporation.

## ARTICLE I NAME

The name of the corporation shall be: S & S HEALTH AND MEDICAL SUPPLIES INC.

# ARTICLE II PRINCIPAL OFFICE

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

#### 10219 S.W 1 ST MIAMI, FL 33174

#### ARTICLE III SHARES

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

## **ONE HUNDRED SHARES @ \$1.00 PAR VALUE**

#### ARTICLE IV INITIAL REGISTERED AGENT

The name and Florida address of the initial registered agent is:

## ORLANDO SEMINO 10219 S.W 1 ST MIAMI, FL 33174

## ARTICLE V INCORPORATOR(S)

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

# ORLANDO SEMINO (President) 10219 S.W 1 ST MIAMI, FL 33174

NANCY SERVLVEDA (Vice President) 10219 S.W 1 ST MIAMI, FL 33174

Signature /. Incorporator

<u>10-08-02</u> Date

08-02

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Signature / Incorporator

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.

<u>\_\_\_\_0-08-0</u> Date

Date

Signature / Registered Agent