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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. UNIVERSAL AMERICA MEDICAL EQUIPMENT, INC.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

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(Corporation Name) (Document #)

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<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
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<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
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TALLAHASSEE, FLORIDA

Examiner's Initials JS

10-18023

ARTICLES OF INCORPORATION  
FOR

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02 OCT 18 AM 11: 51

UNIVERSAL AMERICA MEDICAL EQUIPMENT, INC. SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned incorporator, 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:

UNIVERSAL AMERICA MEDICAL EQUIPMENT, INC.

ARTICLE II PRINCIPAL OFFICE

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

4691 NW 9 ST  
SUITE: A-105  
MIAMI, FL 33126

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to  
have shall be:

100

ARTICLE IV REGISTERED AGENT


The name and Florida street address of the initial registered agent  
shall be:

PORFIRIO MILLA  
4691 NW 9 ST  
SUITE: A-105  
MIAMI, FL 33126

ARTICLE V INCORPORATOR

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

PORFIRIO MILLA  
4691 NW 9 ST  
SUITE: A-105  
MIAMI, FL 33126

  
\_\_\_\_\_  
Signature of Incorporator

10-17-02  
\_\_\_\_\_  
Date

ARTICLE VI DIRECTOR(S)/OFFICER(S)

The name(s) and address(es) of the Director(s)/Officer(s) shall be:

PORFIRIO MILLA (P)  
4691 NW 9 ST  
SUITE: A-105  
MIAMI, FL 33126

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the articles, 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

10-17-02  
\_\_\_\_\_  
Date