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•	OCUMENT NUMBER(S) (if known):  ICAL EQUIPMENT, INC.	
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Profit NonProfit	Amendment Resignation of R.A., Officer/Director	
Limited Liability	Change of Registered Agent	
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Other	Merger	
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OTHER FILINGS	REGISTRATION/ QUALIFICATION	
Annual Report	Foreign	
Fictitious Name	Limited Partnership	
Name Reservation	Reinstatement	
	Trademark	

Other

Examiner's Initials

### 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: LIlly 13 medical Equipment, INC

#### ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be: 15100 SW 30 FeIIQUE HIAWI, FL 33185

#### ARTICLE III - SHARES \_\_\_

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:

Maite Perez 15103 SUL 30 terrace, Alaxi, FL 33185

# ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:  Maite Perez  15103 SW 30 to race, Mani, FL 33185
The undersigned incorporator has executed these Articles of Incorporation this 20 day of OC 10601 2000 Signature  Signature  ARTICLE VI. DIRECTOR(S)
ARTICLE VI- DIRECTOR(S)
The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):  Marte Perez President: 15103 Sul 30 terrale, Marte Perez President: 15103 Sul 30 terrale, Marte Perez President: 15103 Sul 30 terrale, Mari 15103 Sul 30 Terrale, Ma
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