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LAZARUS CORPORATE FILING SERVICE 3320 S.W. 87 AVENUE MIAMI, FLORIDA (308)852-5973 TERESA ROMAN (TALLAHASSEE REPRESENTATIVE) CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): 1.	OFFICE LISE ONLYCOCCUMENT #)	·	
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CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): 1.	MIAMI, FLORIDA (305)552-5973		
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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:

JIP medical equipments, Inc.

SLOBETARY OF STALL DIVISION OF CORPORATIONS

ARTICLE II - PRINCIPAL OFFICE

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

7955 NW 85t Unit 1 Miami Fl 33126

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:

7955 UW 85t Unit 1 Miani FR 33126. Jacqueline Simon

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of

Incorporation is: 7955 NW 8St Unit 1 Miami Fe 33126	I *	
Jacqueline Simon		
The undersigned incorporator has executed these Articles of Incorporation this 31 day of 0 10 per 20 27 Signature	02 NOV -1 PI	DIVISION OF CORF
ARTICLE VI- DIRECTOR(S)	9 H25 H25	STATE
The name(s) and street address(es) of the director(s) to these Articles Incorporation is (are): Tagueline Simon (President). 7955 NW 8ST Unit 1 Miami Fl		

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