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CORPORATION NAME(S) & D	OCUMENT NUMBER(S) (if known):
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· Other	Merger
OTHER FILINGS	REGISTRATION/ QUALIFICATION
Annual Report	Foreign
Fictitious Name	Limited Partnership
Name Reservation	Reinstatement
	Trademark

Other

Examiner's Initials

CD3E031(0/03)

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:

Youn Medical Equiment, Inc

O2 NOV 14 PN 12: 37
SECRETARY OF STATE
TALLAMASSEE ELORIDA

ARTICLE II - PRINCIPAL OFFICE

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

215 5.W 17th Ave suite 307 Miami FL 33135

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:

Idalia Ruiz 215 S.W 17th Ave Suite 307 Miami FL 33135

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles Incorporation is: Idalia Buiz 215 8.W 17 Ave Sorte 307	; of
Hiami FL 33135 The undersigned incorporator has executed these Articles of Incorporation this 13 day of 100 2002 Signature	PILED 102 NOV 14 PM 12: 37 SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE VI- DIRECTOR(S)

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

Idalia Ruiz (PRESIDENT)
215 S.W 17 Ave Sunt 807
Hiami FL 33135

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