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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

ORTHOPEDIC PRODUCT SALES, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

2/18/03 3:06 PM 2/18/03 3:06 PM B03000055868 1

ARTICLES OF INCORPORATION ORTHOPEDIC PRODUCT SALES, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corpora-2003 FEB 19 AH 8: 17 tion Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

TIP SIMIF ARIGE In the con-

The name of the corporation shall be:

ORTHOPEDIC PRODUCT SALES, INC.

The principal place of business of this corporation shall be:

2047 TRADE CENTER WAY NAPLES, FL 34109

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of stocks and its value that this corporation is authorized to have outstanding at one time is: 1000 shares, \$1,00 par

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and directors(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

> James L. Hall 1347 Noble Heron Way Naples, FL 34105

Bettle Hall 1347 Noble Heron Way Naples, FL 34105

Prepared By: Comprehensive Business Solutions 606 Bald Eagle Drive, Suite 601 Marco Island, FL 34145 (941) 389-9555

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ARTICLE VI INCORPORATOR(5)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

James L. Hall 1347 Noble Heron Way Naples, Florida 34105

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 30th of January, 2003

Signature of Incorporator(s)

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statues, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, – in the State of Florida.

1. The name of the corporation:		
	Orthopedic Product Sales.Inc.	

	Of Wohedin's source neronium.			
2. The name and address of the registe	red agent and office is:	TA.	20	
	James L. Hall 1347 Noble Heron Way Naples, FL 34105	· · · · · · · · · · · · · · · · · · ·	2003 FEB 19 AH	11 17 1
signature	em Hace	> 10	8: 17	Manager P
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DATE/~ 3/-	03	•	-	

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUES.

SIGNATURE	Jan Hare
DATE	1-31-03