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OFFICE USE ONLY(DOCUMENT #) LAZARUS CORPORATE FILING SERVICE 3320 S.W. 87 AVENUE MIAMI, FLORIDA (305)552-5973 OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) (Document #) (Corporation Name) (Document #) Pick up time 2.60 Walk in Certified Copy Will wait Mail out Photocopy Certificate of Status AMENDMENTS NEW FILINGS Profit Amendment Resignation of R.A., Officer/Director NonProfit Limited Liability Domestication Other

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TALLAHASSEE FLORIDA

	nesignation of N.A., Office
	Change of Registered Age
	Dissolution/Withdrawal
	Merger
: :	REGISTRATION/ QUALIFICATION
	Foreign
	Limited Partnership
	Reinstatement
	Reinstatement Trademark

OTHER FILINGS

Annual Report

Fictitious Name

Name Reservation

Examiner's Initials

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ARTICLES OF INCORPORATION SEP 12 PM 1:21

TALLAHASSEE FLORIDA

OF

SQUY'S MEDICAL SUPPLIES INC.

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:

SQUY'S MEDICAL SUPPLIES INC.

ARTICLE II: PRINCIPAL OFFICE

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

435 HIALEAH DR UPSTAIRS SUITE 6 HIALEAH DR FL. 33010

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 SHARES OF \$5.00 EACH (\$500.00)

ARTICLE IV: INITIAL REGISTERED AGENT & ADDRESS

The name and address of the initial registered agent is:

MARINA C. CAMPOS 713 W 29th AVE HIALEAH FL. 33018

ARTICLE V: INCORPORATOR(S)

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

MARINA C. CAMPOS 713 W 29th AVE HIALEAH FL. 33018

ARTICLE VI: DIRECTOR(S)

The name(s) of the director (s) in this corporation is (are):

MARINA C. CAMPOS - PRESIDENT-D 713 W 29th AVE HIALEAH FL. 33018

The undersigned has (have) executed these Articles of Incorporation this 10 Days of September 2003.

X Manfor
Signature/Title

Signature/Title .

Signature/Title

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, 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 is:

SQUY'S MEDICAL SUPPLIES INC.

2. The name and address of the registered agents and office is:

MARINA CAMPOS 713 W 29th AVE HIALEAH FL. 33018

> SIGNED: X MCampos
> (Corporate Officer) TITLE: DATE:

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 STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE: Y Manfor

DATE:

TLING FEE: \$20.00

SIGNATURE: Y Manfor

ALLAHASSEE FLOP

REGISTERED AGENT FILING FEE: \$20.00