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Florida Department of State
Division of Corporations
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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

FILED
2003 NOV -6 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

RIPE ORTHOPEDICS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

RPE ORTHOPEDICS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

TRACY PERDOMO
818 NORTH "B" STREET
LAKE WORTH, FLORIDA 33460

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
PRODUCING CUSTOM MOLDED SHOES AND INSERTS

ARTICLE IV SHARES

The number of shares of stock is:

1 (ONE)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

TRACY PERDOMO
818 NORTH "B" STREET
LAKE WORTH, FLORIDA 33460

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

TRACY PERDOMO
818 NORTH "B" STREET
LAKE WORTH, FLORIDA 33460

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

TRACY PERDOMO
818 NORTH "B" STREET
LAKE WORTH, FLORIDA 33460

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Tracy Perdomo
Signature/Registered Agent

11/04/03
Date

Tracy Perdomo
Signature/Incorporator

11/04/03
Date

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TALLAHASSEE, FLORIDA