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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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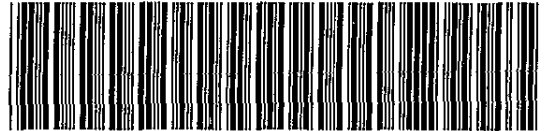
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ACCOUNTING & TAX SERVICE, INC.

2825 N. University Drive, Ste 410 • Coral Springs, Florida 33065
(954) 752-3909 • Fax: (954) 752-7480

November 13, 2003

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Dear Sir/Madam:

Enclosed are two (2) copies of Articles of Incorporation of

T & N Medical, Inc.

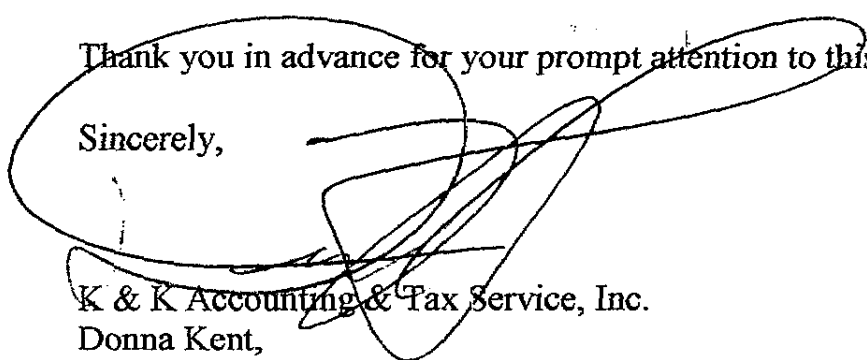
and the appointment of registered agent for filing purposes.

Also enclosed is a check in the amount of \$70.00 to cover charter tax, filing fees and registered agent filing fee. No certified copy is requested at this time.

Please remit the approved Articles of Incorporation to the above address.

Thank you in advance for your prompt attention to this matter.

Sincerely,


K & K Accounting & Tax Service, Inc.
Donna Kent,
President

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ARTICLES OF INCORPORATION

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OF

SECRETARY OF STATE
TALLAHASSEE FLORIDA

T & N Medical, Inc.

The Undersigned, acting as Incorporator of a corporation in the Florida General Corporation Act, adopts the following Articles of Incorporation for such corporation.

1. The name of the corporation is as follows:

T & N Medical, Inc.

2. The period of its duration is perpetual.
3. The purpose is to engage in business permitted under the laws of the United States and the State of Florida.
4. The capital stock authorized, the par value thereof, and the characteristics of such stock shall be as follows: 1,000 shares at \$1.00 per share, common stock. All of the stock shall be payable in cash or other property, real or personal, tangible or intangible, or in labor or services actually performed for the corporation, in lieu of cash, at a just valuation to be fixed by the Board of Directors of this corporation.
5. This corporation shall commence to exist on the date, which the Articles of Incorporation are filed in the Office of the Secretary of State of Florida.

6. The Principal Office, Registered Agent and Registered Office address is:

Thomas Lee
5521 SW 6th Street
Plantation, FL 33317

7. The number of Directors constituting its initial Board of Directors is (2), whose name and address is as follows:

Thomas Lee
5521 SW 6th Street
Plantation, FL 33317

Nera Mahipat-Lee
5521 SW 6th Street
Plantation, FL 33317

8. The name and address of the initial Incorporator is as follows:

Nera Mahipat-Lee
5521 SW 6th Street
Plantation, FL 33317

9. This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto and any right conferred upon the shareholders is subject to this reservation. "I am familiar with and accept the duties and responsibilities as registered agent for said corporation".

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Signed on the following date:

November 13, 2003

Thomas E. Lee

Thomas Lee
Registered Agent

Nera Mahipat-Lee

Nera Mahipat-Lee
Incorporator

SWORN TO AND SUBSCRIBED

BEFORE ME THIS 13th DAY OF November, 2003

STATE OF FLORIDA }

COUNTY OF BROWARD }

BEFORE ME, the undersigned authority, duly authorized to administer oaths and take acknowledgements, personally appeared Thomas Lee & Nera Mahipat-Lee who after first being duly sworn, deposes and say that They are the persons described in and who subscribed to the Articles of Incorporation, he did freely and voluntarily acknowledge before me according to law that he made and subscribed the same for the uses and purposes therein mentioned and set forth and furthermore, that the above facts are true and correct to the best of the knowledge and belief of Thomas Lee & Nera Mahipat-Lee.

SWORN TO AND SUBSCRIBED

before me this _____ day of _____

My Commission Expires:

[Signature]
NOTARY PUBLIC
STATE OF FLORIDA

