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(Requestor's Name)

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☐ PICK-UP

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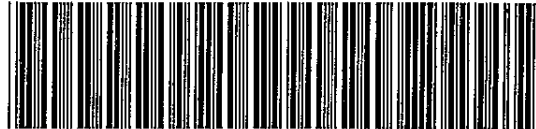
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRET/NO FORN DISSEM  
TALBANE, FLORIDA

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RICHARD T. AVIS♦

♦ALSO ADMITTED IN  
N.Y. AND ILLINOIS

LAW OFFICES  
**RICHARD T. AVIS**  
1325 SNELL ISLE BLVD. NE  
SUITE 205C  
ST. PETERSBURG, FL. 33704  
(813) 894-2626 \* FAX 821-6363

OF COUNSEL  
\_\_\_\_\_  
\_\_\_\_\_  
REFER TO FILE NO.

**TRANSMITTAL LETTER**

January 27, 2004

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Fl. 32314

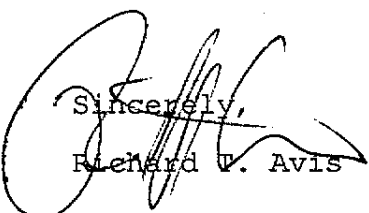
SUBJECT: Sunrise Medical Technologies, Inc.

Enclosed is an original and one (1) copy of the Articles of Incorporation and Designation of Registered Agent and a check for \$70.00. Please stamp the original of these documents to show the date of filing and the filing number and remit to me. We do not require a certified copy at this time.

FROM/ Richard T. Avis, Esq.  
RETURN TO: 1325 Snell Isle Blvd., Suite 205C  
St. Petersburg, Fl. 33704

Thank you for your assistance in this matter.

Sincerely,

  
Richard T. Avis

RTA/lbj  
Enclosures

**ARTICLES OF INCORPORATION**  
**OF**  
**SUNRISE MEDICAL TECHNOLOGIES, INC.**

*The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.*

**ARTICLE I NAME**

*The name of the corporation shall be:*

Sunrise Medical Technologies, Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

1325 Snell Isle Blvd., Suite 205C  
St. Petersburg, Florida 33704

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TALLAHASSEE, FLORIDA

**ARTICLE III SHARES**

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

100,000,000 Shares Common	(No Par Value)
10,000,000 Shares Non-Designated Preferred	

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, 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:*

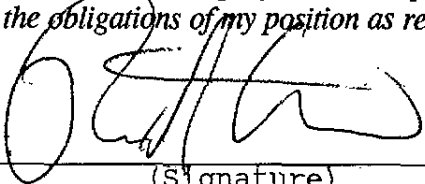
Sunrise Medical Technologies, Inc.

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

Richard T. Avis, Esq.  
1325 Snell Isle Blvd., Suite 205C  
St. Petersburg, Fl. 33704

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*Having been named as registered agent and to accept service of process for the above stated corporation at the 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(Signature)

Richard T. Avis, Esq.