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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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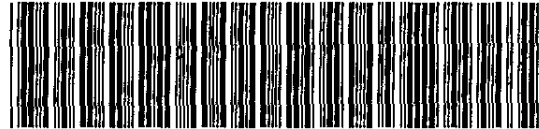
(Business Entity Name)

(Document Number)

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

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## TRANSMITTAL LETTER

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

SUBJECT: ARGUS ENTERPRISES USA, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: CAROLYN L. MCKIEVER

Name (Printed or typed)

12608 HENDERSON ROAD

Address

TAMPA, FL. 33625

City, State & Zip

813-269-8100

Daytime Telephone number

04 JUN 26 AM 10:45  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA

**NOTE: Please provide the original and one copy of the articles.**

## 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:

ARGUS ENTERPRISES USA, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

12608 HENDERSON ROAD, TAMPA, FL. 33625

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MEDICAL SUPPLIES-MAIL ORDER

### ARTICLE IV SHARES

The number of shares of stock is:

100

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

CAROLYN L. MCKIEVER, PRESIDENT  
12608 HENDERSON ROAD, TAMPA, FL. 33625

### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

CAROLYN L. MCKIEVER  
12608 HENDERSON ROAD, TAMPA, FL. 33625

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CAROLYN L. MCKIEVER  
12608 HENDERSON ROAD, TAMPA, FL. 33625

\*\*\*\*\*

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

Carolyn L. McKiever  
Signature/Registered Agent

JUNE 22, 2004

Date

Carolyn L. McKiever  
Signature/Incorporator

JUNE 22, 2004

Date

04 JUN 26 AM 10:45  
DIVISION  
SECRET