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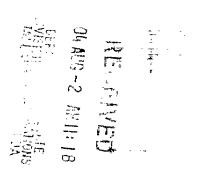
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Examiner's Initials

## ARTICLES OF INCORPORATION

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:

TWINS MEDICAL UNIFORMS, CORPORATION

## ARTICLE II - PRINCIPAL OFFICE

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

535 EAST 25TH. STREET HIALEAH, FLORIDA 33013

## ARTICLE III -SHARES

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

100 AS PER.\$5.00.

## ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GISELA LOPEZ 939 NW 81ST. STREET LOT B-212 MIAMI, FLORIDA 33150 TELEPHONE NUMBER: (305) 609-0576 & (305) 694-9665.

## ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

GISELA LOPEZ 939 NW 81ST. STREET, LOT B-212 MIAMI, FLORIDA 33150

The undersigned incorporator has executed these Articles of Incorporation this 30TH. day of JULY 2004

ARTICLE VI- DIRECTOR(S)

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

GISELA LOPEZ
939 NW 81ST. STREET
LOT B-212
MIAMI, FLORIDA 33150
PRESIDENT, TREASURER AND SECRETARY
SOCIAL SECURITY NUMBER: 594-94-1568
FLORIDA LEARNER LICENSE CLASS E.

LICENSE NUMBER: L120-280-82-942-0..

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## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

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

Registered Agent Signature