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TRANSMITTAL LETTER

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

SUBJECT:	Quality Hear			
Enclosed are an orig	(PROPOSED CORPORA	TE NAME - MUST INCL		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED	
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Daytime Telephone number				

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:	FILED
Quality Health Choice, Corp.	2005 JAN 20 P 3: 30
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	SECRETARY OF STATE TALLAHASSEE, FLORIDA
24 n. Federal Highway Dania Beach, FL 33001 ARTICLE III PURPOSE	
The purpose for which the corporation is organized is: Sales and Renfal of Medical Eq	wipment and
ARTICLE IV SHARES The number of shares of stock is: 100	1
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Leonardo Vallejo- President	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered a 24 n. Federal Highway Leonardo Dania Beach, FL 33004	gent is: Vallejo
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Project Project Today Today	
Leonardo Vallyo, Proidut 26 n. Fed Dania Bec	ich, FL 33004
**************************************	անարագարանագարացումը, արդարագարացումը մարաբումը, մումումը, մումումը, մումումը, մումումը, մումումը, մումումը, մո
certificate, am familiar with and accept the appointment as registered agent and agree to act in this	capacity
Signature/Registered Agent	- 17 05 Date
fund Valor	. 17.05
Signature/Incorporator	Date