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CORPORATION NAME(S) & DOG	CUMENT NUMBER(S) (if known):
1. A SA MEDICAL & (Corporation Name)	EQUIPMENT ESUPPLIES INC.
2. (Corporation Name)	(Document #)
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(Corporation Name)	(Document #)
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Profit	Amendment
NonProfit	Resignation of R.A., Officer/Director
. Limited Liability Change of Registered Agent	
Domestication	Dissolution/Withdrawal
Other	Merger
OTHER FILINGS	REGISTRATION/
Annual Report	QUALIFICATION
Fictitious Name	Foreign
Name Reservation	Limited Partnership
	Reinstatement
,	Trademark

Other

Examiner's Initials

CR2E031(9/92)

### 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:

A & A Median Eavilment & Supplies IN.

## ARTICLE II - PRINCIPAL OFFICE

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

12220 S.M. 128 COONE

## ARTICLE III -SHARES

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

100

# ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

BLANCA G. GONZALEZ 628 N.W. 18TREST: #9-A MAMI, Fr. 33128-1506 SECRETARY OF STATE DIVISION OF CORPORATIONS

#### <u>ARTICLE V - INCORPORATOR</u>

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

## ARTICLE VI- DIRECTOR(S)

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

BLANCA G. GONZALEZ-PRESIDENT

#### 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.

Régistered Agent Signature