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Florida Department of State
Division of Corporations
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TALLAHASSEE FLORIDA

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To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

FLORIDA PROFIT CORPORATION OR P.A.

I. M. D. ENTERPRISES, INC.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

I.M.D. ENTERPRISES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/trailing address is:

533 W. 27 Street
Hialeah, FL 33010

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MEDICAL SUPPLY SALES

ARTICLE IV SHARES

The number of shares of stock is:

100 PAR VALUE: \$1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

PRESIDENT: DESI E. GONZALEZ

ADDRESS(ES):

533 W. 27 Street
Hialeah, FL 33010

VICE PRESIDENT:

DESIDERIO GONZALEZ

ARTICLE VI REGISTERED AGENT

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

DESIDERIO GONZALEZ

533 W. 27 Street
Hialeah, FL 33010

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DESI E. GONZALEZ
533 W. 27 Street
Hialeah, FL 33010

Having been named as registered agent to accept service of process for the above named 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.

Signature/Registered Agent

Signature/Incorporator

Date

Date