

FROM :

FAX NO. :

Apr. 28 2004 11:25PM P1

Division of Corporations

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**P05000142457**

Florida Department of State  
Division of Corporations  
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To:

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

From:

Account Name : BUSINESS WORLD TRANSACTIONS, INC.  
Account Number : 104512000707  
Phone : (305) 266-4080  
Fax Number : (305) 227-2388

**FLORIDA PROFIT CORPORATION OR P.A.**  
**NECESSARY MEDICAL EQUIPMENT, CORP.**

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TALLAHASSEE, FLORIDA

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CD. 10-21

FROM :

FAX NO. :

Apr. 28 2004 04:05PM P2

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## ARTICLES OF INCORPORATION

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Act, hereby adopt(s) the following Articles of Incorporation.*

### ARTICLE I

#### NAME

The name of the corporation shall be: NECESSARY MEDICAL EQUIPMENT, CORP.

### ARTICLE II

#### PRINCIPAL OFFICE

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

6506 KENDALE LAKE DR. # 310 SPANISH VILLAGE  
MIAMI, FL. 33183

### ARTICLE III

#### SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: One Thousand (1,000) shares of One Dollar (\$1.00) par value common stock, which shall be designated [COMMON SHARES.]

### ARTICLE IV

#### INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

YOHANNA VENTURA  
6506 KENDALE LAKE DR. # 310 SPANISH VILLAGE  
MIAMI, FL. 33183

Prepared by: YOHANNA VENTURA  
6506 KENDALE LAKE DR. # 310 SPANISH VILLAGE  
MIAMI, FL. 33183  
786 2474347

Electronically Sent By: BUSINESS WORLD TRANSACTIONS, INC.  
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*H05000247956*


**ARTICLE V  
INCORPORATOR(S)**

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

YOLIANNA VENTURA  
6506 KENDALE LAKE DR. # 310 SPANISH VILLAGE  
MIAMI, FL. 33183

DIRECTOR & PRESIDENT

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this  
19 day of OCTOBER, 2005

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

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FROM :

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H05000 247956

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: NECESSARY MEDICAL EQUIPMENT, CORP.

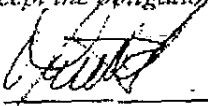
2. The name and address of the registered agent and office is:

YOLIANNA VENTURA  
6506 KENDALE LAKE DR. # 310 SPANISH VILLA  
MIAMI, FL. 33183

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

  
(SIGNATURE)

(DATE) 10-19-05

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