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Florida Department of State
Division of Corporations
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STATE
TALLAHASSEE, FLORIDA

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To:

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

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

FLORIDA PROFIT CORPORATION OR P.A.

acme home medical equipment, inc.

Certificate of Status	0
Certified Copy	1
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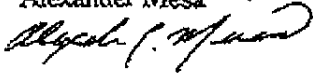
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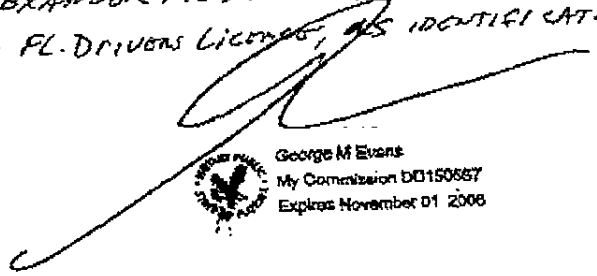
TO Whom It May Concern,

I, Alexander Mesa am President and owner of "ACME Home Medical Equipment, LLC" Document # LD4000054203. I will not reinstate this LLC because I intend to use this name for my new corporation.

Alexander Mesa



THE foregoing instrument WAS REKNOWLEDGED BEFORE ME THIS 7th day of Nov. 2005, by ALEXANDER MESA who is personally known to me and/or who has produced his FL. DRIVERS LICENSE, AS IDENTIFICATION AND WHO did/didnot take oath.



George M Evans
My Commission DD150667
Expires November 01 2006

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④

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:

ACME Home Medical Equipment, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

2740 SW. 117 AVE
DAVIE, FL 33330

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

GENERAL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES @ \$100 PAR VALUE.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ALEXANDER MESA (PRESIDENT, OWNER) VP, TREAS. & SEC.
2740 SW 117 AVE
DAVIE, FL 33330

ARTICLE VI REGISTERED AGENT

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

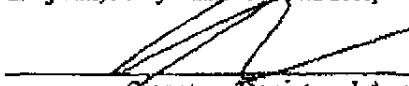
George M. ~~EVANS~~ EVANS
800 Douglas Road # 101
Cornell Gables, Fla. 33134-3187


ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ALEXANDER MESA
2740 SW 117 AVE
DAVIE, FL 33330

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

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TALLAHASSEE, FLORIDA

11/7/05

Date
11-7-05

Date

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