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LAZARUS CORPORATE FILING SER	VICE	
3320 SW 87TH AVENUE		
MIAMI, FL 33165 (305) 552-55	973	
	Office Use Only	 ۲,
CORPORATION NAME(S) & DOCUM	ENT NUMBER(S), (if known):	
WEST DADE MED-	SUPPLY INC.	
$\frac{1}{(Corporation Name)}$	(Document #)	<u> </u>
2.		
(Corporation Name)	(Document #)	
3(Corporation Name)	(Document #)	
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4(Corporation Name)	(Document #)	
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NEW FILINGS	AMENDMENTS	
 Profit Not for Profit 	Amendment Resignation of R.A., Officer/Direc	tor
 Limited Liability Domestication 	Change of Registered Agent Dissolution/Withdrawal	
Other	Merger	
OTHER FILINGS	REGISTRATION/QUALIFICATION	<u>N</u>
Annual Report	Foreign	
General Fictitious Name	Limited Partnership Reinstatement	
	Trademark Other	

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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

DEC-1 1.111: 40

The name of the corporation shall be:

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West Dade Med-Supply Inc.

ARTICLE II - PRINCIPAL OFFICE

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

5020 NW 191 St OpaloKa, FL 33055

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:

Daniel Aponte Sanchez 5020 NW 191 st opaloKa, FL. 33055.

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is: Daniel Aponte Sanchez 5020NW 1915t opaloKa, FL.33065.

The undersigned incorporator has executed these Articles of Incorporation this day of 2005.

Signature

ARTICLE VI- DIRECTOR (S)

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

Daniel Aponte Sanchez (P)

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.

Registered Agent Signature