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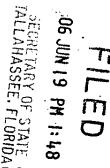
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CORPORATION NAME(S) & DOC	UMENT NUMBER(S), (if known):
1. QUEZADA MEDI	CAL SUPPLIES CORPORATION
(Corporation Name)	(Docurrent #)
2.	
(Corporation Name)	(Document #)
3.	
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
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NEW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other
	Examiner's Initials



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 1 - NAME

The name of the corporation shall be:

Quezada Medical Supplies Corporation.

ARTICLE II - PRINCIPAL OFFICE

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

5088 NW 74th Avenue. Miami FL 33166.

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:

Angel Alvarez 2070 Bright Or Apt# 2 Habah FL 33010

<u>ARTICLE V - INCORPORATOR</u>

2006.

The name and street address of the incorporator to these Articles of
Incorporation is: Anna Aluneas
Incorporation is: Angel Alvanez. 2070 Bright On Apt 42.
Hralech FL 33010.
The undersigned incorporator has executed these Articles of

Signature

day of

ARTICLE VI- DIRECTOR (S)

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

Angel Alm Rez President.

Incorporation this

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 cam familiar with and accept the obligations of my position as Registered Agent.

Registered/Agent Signature