### Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : ARES & COMPANY, C.P.A., P.A.

Account Number : 120000000268 Phone : (305)229-8256 Fax Number : (305)229-8252

### FLORIDA PROFIT/NON PROFIT CORPORATION

D. D. & SONS MEDICAL SUPPLIES, INC.

Certificate of Status	0
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#### ARTICLES OF INCORPORATION

#### OF

### D. D. & SONS MEDICAL SUPPLIES, INC.

THE UNDERSIGNED has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

#### ARTICLE I

The name of this corporation shall be:

## D. D. & SONS MEDICAL SUPPLIES, INC.

#### ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

#### **ARTICLE III**

The general nature of the business and objects and purpose proposed to be transacted and carried on by this corporation are to do any and all of the things, as fully and to the same extent as natural persons might do, viz:

PREPARED BY: ARES & COMPANY, C.P.A., P.A.

3636 SW 87<sup>TH</sup> AVE. MIAMI, FL. 33165

Transact any and all lawful business.

2006 AUG 23 AH 9: 15
SECRETARY OF STATE
TALLAHASSEE SLORIDA
600021

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(1) Said corporation shall further have powers:

To have perpetual succession by its corporate name,

### D. D. & SONS MEDICAL SUPPLIES, INC.

#### **ARTICLE IV**

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 100 shares, having an individual par value of US\$10.00.

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

#### ARTICLE V

The name and street address of the initial Registered Agent and Registered Office of this corporation shall be:

DENISSE DIAZ 3485 WEST FLAGLER ST. SUITE 500 (LOWER LEVEL) MIAMI, FL. 33135-1042

The mailing address of the Corporation shall be:

3485 WEST FLAGLER ST. SUITE 500 (LOWER LEVEL) MIAMI, FL. 33135-1042

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#### ARTICLE VI

The initial Board of Directors and Shareholders of the Corporation shall be composed by TWO (2) persons, whose names and addresses are:

PRESIDENT

DENISSE DIAZ 3485 WEST FLAGLER ST SUITE 500 (LOWER LEVEL) MIAMI, FL. 33135-1042 100% SHARBHOLDER

JORGE ARMANDO DIAZ - TREASURER 3485 WEST FLAGLER ST. SUITE 500 (LOWER LEVEL) MIAMI, FL. 33135-1042

The name and address of the incorporator executing these Articles of Incorporation is:

DENISSE DIAZ 3485 WEST FLACLER ST. SUITE 500 (LOWER LEVEL) MIAMI, FL. 33135-1042

The undersigned incorporator has executed these Articles of Incorporation this 23 nd day of August, 2006.

DENISSE DIAZ PRESIDENT

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# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provision of sections 607,0501 or 617,0501, Florida Statutes, the undersigned corporation, organized under the law 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:

### D. D. & SONS MEDICAL SUPPLIES, INC.

2. The name and address of the Registered Agent and office is:

DENISSE DIAZ 3485 WEST FLAGLER ST. SUITE 500 (LOWER LEVEL) MIAMI, FL. 33135-1042

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 HERBBY 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:

DENISSE DIAZ

DATE: 8-23-2006

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