

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : ROBERTS, SEWARD & COMPANY PA
Account Number : I20040000178
Phone : (813) 225-1040
Fax Number : (813) 221-3135

FLORIDA PROFIT/NON PROFIT CORPORATION**MCKAY MEDICAL, INC**

Certificate of Status	0
Certified Copy	0
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SEAL OF THE STATE
TALLAHASSEE, FLORIDA

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:

MCKAY MEDICAL, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4645 87TH DR. S
LAKE WORTH, FL 33467

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

CAROLYN MCKAY
4645 87TH DR. S
LAKE WORTH, FL 33467

ARTICLE VI REGISTERED AGENT

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

CAROLYN MCKAY
4645 87TH DR. S
LAKE WORTH, FL 33467

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CAROLYN MCKAY
4345 87TH DR. S
LAKE WORTH, FL 33467

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

X Carolyn McKay
Signature/Registered Agent

X 10/19/06
Date

X Carolyn McKay
Signature/Incorporator

X 10/19/06
Date

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