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LAZARUS CORPORATE FILING SERVICE	
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CORPORATION NAME(S) & DOCUMENT N	UMBER(S), (if known):
1. FBM INTERNATION	VAL MEDICAL INC.
(Corporation Name)	(Document #)
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NEW FILINGS AME	ENDMENTS
	
	Amendment Resignation of R.A., Officer/Director
Limited Liability	Change of Registered Agent
{*************************************	Dissolution/Withdrawal Merger
	GISTRATION/QUALIFICATION
	Foreign Limited Partnership
·	Reinstatement
·	Trademark Other
CDATES A CELOS	Examiner's Initials

CR2E031(7/97)

ARTICLES OF CORPORATION

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

<u>ARTICLE I -NAME</u>

The name of the corporation shall be:

T & M INTERNATIONAL MEDICAL INC.

THE IS HID: 31

ARTICLE II - PRINCIPAL OFFICE

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

1827 NW 22 STREET, MIAMI FL 33142

ARTICLE III – SHARES

The number of shares of stick 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:

MARCELO MEDINA 1827 NW 22 STREET, MIAMI FL 33142

FILED

<u>ARTICLE V - INCORPORATOR</u>

2006 DEC 13 AM 10: 31

The name and street address of the incorporator to these Articles of Incorporation in SECRETARY OF STATE

MARCELO MEDINA

1827 NW 22 STREET, MIAMI FL 33142

The undersigned incorporator has executed these Articles of Incorporation this <u>12</u> day of DECEMBER. 2006

Signature

ARTICLE VI - DIRECTOR(S)

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

1.- MARCELO MEDINA------PRESIDENT 100% 1827 NW 22 STREET, MIAMI FL 33142

CERTIFICATE 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