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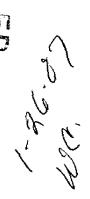


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## LAZARUS CORPORATE FILING SERVICE

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CORPORATION NAME(S) & DOCU	JMENT NUMBER(S), (if known):	
ORTA MEDICAL &	EQUIPMENT CORP.	
(Corporation Name)	(Document #)	
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Not for Profit	Resignation of R.A., Officer/Director	
Limited Liability	Change of Registered Agent	
Domestication Other	Dissolution/Withdrawal	
	☐ Merger	
OTHER FILINGS	REGISTRATION/QUALIFICATION	
☐ Annual Report	☐ Foreign	
Fictitious Nume	Limited Partnership	
,	Reinstatement	
	Trademark  Other	
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<b>***</b>	Examiner's Initials	
CR2E031(7/97)		

#### 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

The name of the corporation shall be:

ORta Medical Equipment Corp.

#### ARTICLE II - PRINCIPAL OFFICE

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

6447 miami Lakes Dr East Guite 2250 miami Lakes, Florida 33014. 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:

Hever capote 6447 miami cakes Dr East Suite 2250 miami cakes, Florida 33014.

#### ARTICLE V - INCORPORATOR

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

Hever capote

6447 miami Cakes Dr East Suite 2250 miami Lakes, Florida 33014.

The undersigned incorporator has executed these Articles of Incorporation this 2 day of OLA 2007

Signatura

#### ARTICLE VI DIRECTOR(S)

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

Hever appote (President) 6447 miami Lakes Dr. East Suite 2250 miami Lakes, Florida 33014.

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