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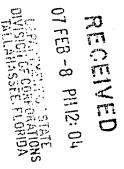
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DIVISION OF CORPORATIONS

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CORPORATION NAME(S) & DOCU	MENT NUMBER(S), (if known):
1. DIAMED MEDIC	PAL SERVICES INC (Document #)
(Corporation Name)	(Document #)
2. (Corporation Name)	(December 41)
(Corporation Name)	(Document #)
3	
(Corporation Name)	(Document #)
4 .	
(Corporation Name)	(Document #)
Walk in Pick up time	2 00 Certified Copy
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NEW FILINGS	<u>AMENDMENTS</u>
Profit	☐ Amendment
Not for Profit Limited Liability	Resignation of R.A., Officer/Director
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Other	☐ Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report	Foreign .
☐ Fictitious Name	Limited Partnership Reinstatement
	Trademark
	Other

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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:

DIAMED Medical Services Inc

ARTICLE II - PRINCIPAL OFFICE

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

6555 NW 365t. Soile 320 Virginia Gardens, 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:

Oriel Glonso. 6555 NW 36 st Soite 320 Virginia Bardens, FL 33166

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ARTICLE V - INCORPORATOR

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

Ariel Alonso 6555 NW 36 et Suite 320 Virginia Gardens FL 33166

The undersigned incorporator has executed these Articles of Incorporation this 07 day of February 2007

Signature

ARTICLE VI- DIRECTOR(S)

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

Aviel alonso- President.

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