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2007 SEP 25 PM 1:51  
SEC. OF STATE  
TALLAHASSEE, FLORIDA

T. Burch SEP 26 2007

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AREA CODE 813

September 21, 2007

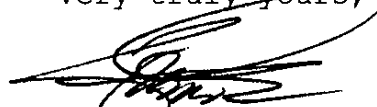
Corporate Records Bureau  
Division of Corporations  
Department of State  
P. O. Box 6327  
Tallahassee, FL 32301-6327

In Re: Incorporation of Eastcoast Prosthetics, Inc. ~~and Westcoast~~  
Prosthetics, Inc.

Gentlemen:

Enclosed are the original of the Articles of Incorporation of the above two corporations. A check for \$140.00 for filing is enclosed.

Very truly yours,



STEPHEN D. CARLE

SDC:bg

Enclosures

FILED

2007 SEP 25 PM 1:51

SEC. OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

OF

EASTCOAST PROSTHETICS, INC.

The undersigned, being qualified to act as an incorporator under the Florida General Corporation Act, adopts the following Articles of Incorporation for the purpose of organizing a Corporation under the Act:

1. The name of the Corporation is:

EASTCOAST PROSTHETICS, INC.

2. The duration of the Corporation is perpetual.

3. The street address of the initial principal office and of the registered office of the Corporation in the State of Florida shall be 6417 Gall Boulevard, Zephyrhills, Florida 33542, and the name of the Registered Agent at such address is PAUL C. WEOTT.

4. The Corporation is to be for profit.

5. The purposes for which the Corporation is organized are:

To make, manufacture, devise, fit and sell to the public orthotic and prosthetic devices of all types;

To do any or all of the things herein set forth, and all things usual, necessary or proper in furtherance of or incidental to said business, to the same extent as natural persons might or could do in any part of the world, at wholesale or retail, as principal, agent, contractor, trustee

or otherwise, and either alone or in company with others;

To carry on any other business, whether selling, manufacturing or otherwise, and to do all things not forbidden by the laws of the State of Florida, provided, however, that the Corporation is not being formed for any purpose which requires compliance with statutory provisions not a part of the Act which govern the formation of corporations and is not being organized for a purpose or purposes which require authorization under the laws or statutory regulations of the State of Florida by any office or commission other than the Office of the Secretary of State;

To be vested with all the rights and powers now or hereafter conferred upon such corporations by the laws of the State of Florida;

But if this Corporation shall undertake to do any of the things hereinbefore set forth in any state other than Florida, in the District of Columbia, in any territory, colony, or dependency of the United States, or in any foreign country or in any colony or dependency thereof, then as to such jurisdictions, and each of them, this Corporation shall be deemed to have such powers only insofar as such jurisdictions respectively permit corporations within their several respective jurisdictions to execute such powers.

6. The maximum number of shares that the Corporation is authorized to issue is one thousand (1,000) shares, all without par value. Such shares shall be of one class and shall be designated common shares.

7. The initial Board of Directors shall contain one Directors whose name and address follow:

PAUL C. WEOTT  
6417 Gall Boulevard  
Zephyrhills, Florida 33542

9. The name and address of the incorporator is:

PAUL C. WEOTT  
6417 Gall Boulevard  
Zephyrhills, Florida 33542

This Corporation shall enjoy and be subject to such benefits, privileges and immunities and such restrictions, liabilities and obligations as are provided with respect to corporations for profit generally by the laws of the land and which are held applicable to corporations for profit organized under the Florida General Corporation Act.

EXECUTED This 21 day of September, 2007.

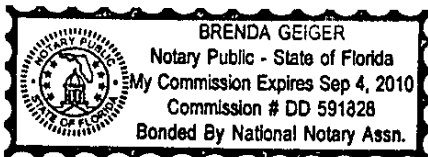
Paul C. Weott  
PAUL C. WEOTT  
INCORPORATOR

STATE OF FLORIDA )

COUNTY OF PASCO )

The foregoing instrument was acknowledged before me this 21 day of September, 2007, by PAUL C. WEOTT,  
[ ] who is personally known to me, OR  
[ x ] who has produced a FL Driver License as identification.

Brenda Geiger  
Signature of Notary Public



BRENDA GEIGER  
Typed/Printed Name of Notary Public  
NOTARY PUBLIC

Serial Number (if any)

My commission expires: \_\_\_\_\_

Acceptance of Designation as Registered Agent

The undersigned hereby accepts designation as Registered Agent of EASTCOAST PROSTHETICS, INC., and acknowledges that the undersigned is familiar with and accepts the obligations of registered agents under Florida law, this 21 day of September, 2007.

  
\_\_\_\_\_  
PAUL C. WEOTT