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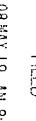
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SECHELANT ON STATE



COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: American Wound Care Management of Florida, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	l a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL COPY REQUIRED	

FROM:	McClosky, D'Anna & Dieterle, LLP	
	Name (Printed or typed)	
	2300 Glades Road, Suite 400 East Tower	
	Address	
	Boca Raton, Florida 33431	
	City, State & Zip	
	(561) 368 - 9200	
	Daytime Telephone number	

NOTE: Please provide the original and one copy of the articles.

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:

American Wound Care Management of Florida, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 2300 Glades Road, Suite 400, East Tower, Boca Raton, Florida 33431

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

For any and all lawful purposes

ARTICLE IV SHARES

The number of shares of stock is:

200 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Fred Ferrara - President, Vice President, Treasurer, and Director Harry Ruddy - Secretary and Director c/o McClosky, D'Anna & Dieterle, LLP

2300 Glades Road, Suite 400 East Tower

Boca Raton, Florida 33431

ARTICLE VI REGISTERED AGENT

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

Gordon A. Dieterle, Esquire

2300 Glades Road, Suite 400 East Tower

Boca Raton, Florida 33431

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Gordon A. Dieterle, Esquire

2300 Glades Road, Suite 400 East Tower

Boca Raton, Florida 33431

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

Signature/Registered Agent

Signature/Incorporator

5/15/08

Date

)ate

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