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Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850) 617-6381

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Account Name : CSH SERVICES, LLC  
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TALLAHASSEE, FLORIDA

**FLORIDA PROFIT/NON PROFIT CORPORATION**

**ML Medical, Inc.**

Certificate of Status	0
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DIVISION OF CORPORATION

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T. Burch JAN 8 2009

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**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:

ML MEDICAL, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

6450 BORASCO DRIVE #3707

VIERA, FLORIDA 32940

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

**ARTICLE IV SHARES**

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0.01

**ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)**

The name(s), address(es), and title(s) of the directors and officers is:

DIRECTOR, PRESIDENT, VICE-PRESIDENT, SECRETARY, TREASURER

MEGAN FEDULLO

6450 BORASCO DRIVE #3707

VIERA, FLORIDA 32940

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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PAGE 2 ML MEDICAL, INC.

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

MEGAN FEDULLO

6450 BORASCO DRIVE #3707

VIERA, FLORIDA 32940

**ARTICLE VII INCORPORATOR**

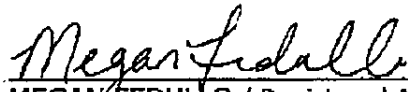
The name and Florida street address of the incorporator is:

MEGAN FEDULLO

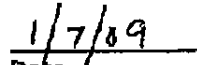
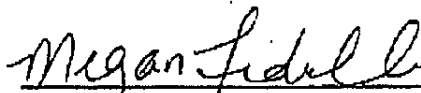
6450 BORASCO DRIVE #3707

VIERA, FLORIDA 32940

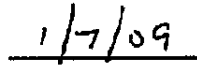
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.



MEGAN FEDULLO / Registered Agent

  
Date

MEGAN FEDULLO / Incorporator

  
Date