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Nel 8-18-09

COVER LETTER

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

SUBJECT:	Prestige Sura	ical Inc	, ,		
	(PROPOȘED CORPORAG	Œ NAME – <u>MUST INCLI</u>	JDE SUFFIX)		
Enclosed are an orig	inal and one (1) copy of the artic	les of incorporation and	a check for:		
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy & Certificate of Status			
		ADDITIONAL CO	PY REQUIRED		
FROM:	Kathleenm.H.				
15667 Lemon Fish DR. Address					
Bradenton, FL 34202 City, State & Zip					
941-544-6183 Daytime Telephone number					
<u>.</u>	Khogue 1 @ + E-mail address: (to be used	ampabay. r	otification)		

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

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ARTICLES OF INCORPORATION	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED
ARTICLE I NAME	
The name of the corporation shall be:	09 AUG 17 PM 2: 53
Prestige Surgical INC.	MECHANISTICS STRUCTURE
ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is:	
15667 Lemon Fish DR.	
Bradenton, FL 34202 ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
and a line a specific and all lawsfield	business authorized
and not prohibited by the tlorida as the same may be from time to ARTICLE IV SHARES	L Beneral Corporation Act time amended.
The number of shares of stock is:	(#1,000)
which shall be designated Common Shares ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	s with apar value of one of nolloo Dollars
List name(s), address(es) and specific title(s):	_
Kathleen M. Hogue 15667 Lemo President/Princip a /	n rish DR., Bradenton, HL 342
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of t	he registered agent is:
The name and Propries (1.5. Box 1.5. acceptable) of the	no registered agent is.
Kathleen M. Hogue 15667 Lemon Fish DR.,	Bradenton, PL 34202
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Kathleen M. Hogue 15667 Lemon Fish DR	
BRADENTON, FL 34202	*********
Having been named as registered agent to accept service of process place designated in this certificate, I am familiar with and accept to agree to act in this capacity	-
Kathlan M. Harris	8-12-09
Signature/Registered Agent Kallum Hogue Kallum Hogue Kallum M. Hogue	$\frac{8-12-09}{\text{Date}}$
Karpologia M. Hogens	8-12-09

Signature/Incorporator

Date