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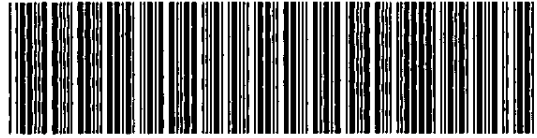
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EARNEST
LAW FIRM
TIGHE

December 31, 2009

Division of Corporations
409 East Gaines Street
Tallahassee, FL 32301

RE: Prime Med Service, Inc.

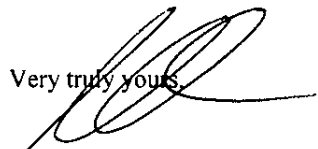
Dear Sir/Madam:

Enclosed are the original and two copies of the Articles of Incorporation for the above-named proposed Florida corporation. Also enclosed is a check in the amount of \$78.75, representing payment of the following:

Filing fee	\$35.00
Certified copy fee	\$8.75
Registered agent designation	\$35.00

Please file the enclosed Articles of Incorporation and return a certified copy to the undersigned. You will note that the Registered Agent is named in the Articles of Incorporation. Thank you for your courtesies in this matter.

Very truly yours,


Mary M. Earnest

Encl.

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EARNEST/TIGHE LAW FIRM, P.A.
TARPON RIVER CENTER
500 SE 15TH STREET, SUITE 106, FORT LAUDERDALE, FLORIDA 33316
954-525-5644 FAX 954-525-5799
www.earnestlaw.com

ARTICLES OF INCORPORATION
OF
PRIME MED SERVICE, INC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE I. CORPORATE NAME.

The name of this corporation is Prime Med Service, Inc.

ARTICLE II. NATURE OF BUSINESS AND POWERS.

The general nature of the business to be transacted by this Corporation is to engage in any and all business permitted under the laws of the State of Florida.

ARTICLE III. CAPITAL STOCK.

The maximum number of shares of stock that this Corporation is authorized to issue and have outstanding at any one time is 100 shares of common stock with one dollar (\$1.00) par value.

ARTICLE IV. TERM OF EXISTENCE.

This Corporation shall have perpetual existence, commencing upon filing of these articles.

ARTICLE V. MAILING ADDRESS.

The address of the principal office of the corporation is 1147 NE 9th Avenue, Fort Lauderdale FL 33304 and the mailing address of the corporation is 1147 NE 9th Avenue, Fort Lauderdale, FL 33304.

ARTICLE VI. REGISTERED AGENT AND INITIAL REGISTERED OFFICE.

The Registered Agent and the street address of the initial Registered Office of this Corporation in the State of Florida shall be: Bryan Chalfant, 1147 NE 9th Avenue, Fort Lauderdale, FL 33304.

The Board of Directors from time to time may move the Registered Office to any other address in the State of Florida.

ARTICLE VII. BOARD OF DIRECTORS.

This Corporation shall have 1director(s) initially. The number of directors may be increased or diminished from time to time by Bylaws adopted by the stockholders, but shall never be less than one.

ARTICLE VIII. INITIAL DIRECTOR.

The name(s) of the initial director(s) of this Corporation and their street addresses are:
Bryan Chalfant 1147 NE 9th Avenue, Fort Lauderdale, FL 33304.

The persons named as initial directors shall hold office for the first year of existence of this Corporation or until their successors are elected or appointed and have qualified, whichever occurs first.

ARTICLE IX. INCORPORATOR.

The name and street address of the person signing these Articles of Incorporation as the Incorporator is:
Bryan Chalfant, 1147 NE 9th Avenue, Fort Lauderdale, FL 33304

ARTICLE X. AMENDMENT.

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the stockholders and approved at a stockholders' meeting by at least a majority of the stock entitled to vote, unless all of the directors and all of the stockholders sign a written statement manifesting their intention that a certain amendment of these Articles of Incorporation be made.

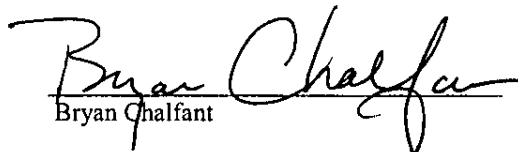
ARTICLE XI. INDEMNIFICATION.

The Corporation shall indemnify any officer or Director, or any former officer, to the full extent permitted by law.

ARTICLE XII. BANKING

Any one of the officers is authorized to designate a depository for the funds of the Company and any one of the officers is authorized to draw checks on the account at that Bank in the form required by the Bank.

IN WITNESS WHEREOF, the undersigned, as Incorporator, has executed the foregoing Articles of Incorporation on the 1 day of JAN, 2010.

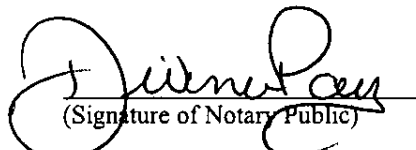

Bryan Chalfant

STATE OF FLORIDA
COUNTY OF BROWARD

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared Bryan Chalfant, who has produced [type of identification] Drivers License, [Number] C415-061-58-3000 as identification and who did not take an oath.

Witness my hand and official seal in the County and State last aforesaid this 1 day of JAN, 2010.




(Signature of Notary Public)

Diana Paiz
(Name of Notary Public typed, printed stamped) Notary Public, State of Florida

My commission expires 5/16/13

DESIGNATION AND ACCEPTANCE

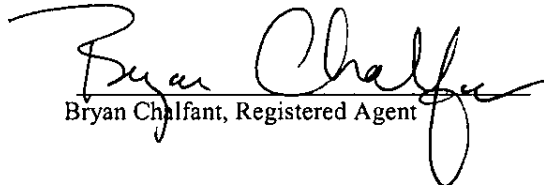
IN COMPLIANCE with Section 48.091, Florida Statutes, the following is submitted:

That Prime Med Service, Inc desiring to organize under the laws of the State of Florida, with its principal office, as indicated in the Articles of Incorporation, at 1147 NE 9th Avenue Fort Lauderdale FL 33304, County of Broward, State of Florida, has named Bryan Chalfant, located at 1147 NE 9th Avenue Fort Lauderdale FL 33304, Broward County, State of Florida, as its agent to accept service of process within this state.

ACKNOWLEDGMENT:

Having been named to accept service of process for the above-named Corporation, at the place designated in this certificate, the undersigned agrees to act in this capacity, and agrees to comply with the provisions of Florida law relative to keeping the designated office open.

Date: 1/1/10


Bryan Chalfant, Registered Agent

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA