ASTOCIA SUBBER

LAZARUS CORPORATE INDUSTRIES, INC. (Raquester's Name) 890 S.W. 87 AVENUE #16 (Address) 800001395868 -02/01/95--01102--002 MIAMI, FLORIDA 33174 (305)552-5973 (City, State, Zip) ****122.50 ****122.50 (Phone #1 LOCAL REPRESENTATIVE TALLAHASSEE OFFICE USE ONLY (904)385-6735 CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): 2 N MEDICAL EQUIPMENT INC 2. (Carporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time 2100 Certified Copy Mad out Photocopy Certificate of Status **NEW FILINGS AMENDMENTS Profit** Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILNGS REGISTRATION/ QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement

Trademark

Examiner's Initials

Other

ARTICLES OF INCORPORA'LION

F &	of N MEDICAL EQUIPMEN	Yr inc.	
	(name of corporatio	n)	
The undersigned subscriber(s) to these Artic corporation under the laws of the State of	des of Incorporation, natu f Florida.	ral person(s) compo	etent to contract, hereby form a
	TICLE I - CORPORATI	E NAME	
The name of the corporation is:	N MEDICAL EQUIPMEN	T INC.	95 JA
	ARTICLE II - DURAT	ION	(i) (ii) (iii) (iii) (iii) (iii)
This corporation shall exist perpetually un	less dissolved according	to Florida law.	그 그
	ARTICLE III - PURPO	OSE	1 2: 2 FLON
The corporation is organized for the purpos United States and the State of Florida.	e of engaging in any activ	vities or business pe	ermitted under the laws of the
The corporation is authorized to issue	TICLE IV - CAPITAL One hundred		of One Dollar
	lue Common Stock, whi	•	
The name and street address of the Initial ME FREDDY LAUREIRO. DRESS 11290 SW 47th Terrace	Sout of the	- Corporation is:	(brincibal wadress
_Y Miami	FLORIDA		zip 33165
This corporation shall have Two increased or diminished from time to time addresses of the initial director(s) of the c	by the By-Laws, but sha	initially. The num	ber of directors may be either an one (1). The names and f
FREDDY LAUREIRO			
DDRESS 11290 SW 47th Terrace			
rry Miami	STATE Flo	orida	ZIP 33165
AME NORKA LAUREIRO		·	
DDRESS 11290 SW 47th Terrace			
πν Miami	STALE Flo	orida	zır 33165
AME			
DDRESS			

STATE

ARTICLE VII - INCORPORATORS

The names and addresses of the person(s) signing these Articles of Incorporation are as follows:

NAME FREDDY LAUREIRO	·		
ADDRESS 11290 SW 47th Terrace			· · · · · · · · · · · · · · · · · · ·
cny Miami	STATE	Florida	33165
NAME NORKA LAUREIRO	JAM.		ZIP
ADDRESS 11290 SW 47th Terrace			
cuy Miami		Florida	33165
NAME	SIATE		ZIP 33103
ADDRESS			
CITA			
	SIATE		ZIP
IN WITNESS WHEREOF, the undersigned day of, 19_95	subscriber(s) have exe	cuted these Articles	
	101011	Down 1	(Seal)
			(Scal)
STATE OF FLORIDA)		
COUNTY OF Dade	ŚS		
pefore me, a Notary Public authorized to tal			
FREDDY LAUREIRO AND NOR	KA LAUREIRO		
crown to me and known to be the person cknowledged before me that They	on(s) who executed the executed these Article	e foregoing Articles	of Incorporation, and who
N WITNESS WHEREOF, I have hereunto at	ffixed my hand and seal	, in the State and Cou	inty aforesaid, this26th
ay ofJanuary, 1995	. /		
(Notation State)	/ (C, c)	- C	2
(Notary Seal)		State of Florida at Large	D D MANAGEMENT
OFFICIAL NOTARY SHAL HECTOR R VINAJERAS NOTARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC18329	My Commission	expires: E MECIO	r R. Vinajera s

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

F & N MEDICAL EQUIPMENT INC

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.034, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

Having been named to accept service of process for the above state corporation at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)