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0[illegible]14[illegible] 17:03 FAS-T CORPORATE AGENTS (30[illegible]59[illegible]5[illegible] [illegible]001

3/14/95 FLORIDA DIVISION OF CORPORATIONS 1:50 PM
PUBLIC ACCESS SYSTEM
(((H95000002918))) ELECTRONIC FILING COVER SHEET

TO: DIVISION OF CORPORATIONS
DEPARTMENT OF STATE
STATE OF FLORIDA
409 EAST GAINES STREET
TALLAHASSEE, FL 32399
FAX: (904) 922-4000

FROM: FAS-T CORP. AGENTS, INC.
8405 NW 53RD ST
SUITE C-100
MIAMI FL 33166- 00000
CONTACT: LIDIA FERNANDEZ
PHONE: (305) 599-0839
FAX: (305) 592-9591

(((H95000002918)))
DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
NAME: GUILLERMO MEDICAL RENTAL & SUPPLY, INC.
FAX AUDIT NUMBER: H95000002918
DATE REQUESTED: 03/14/1995
CERTIFIED COPIES: 1
NUMBER OF PAGES: 3
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TIME REQUESTED: 13:50:46
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95 MAR 15 AM 9:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H95000002918

ARTICLES OF INCORPORATION

OF

GUILLERMO MEDICAL RENTAL & SUPPLY, INC.

FILED
95 MAR 15 AM 9:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: GUILLERMO MEDICAL RENTAL & SUPPLY, INC.

The principal place of business of this corporation shall be: 1699 Coral Way, Suite 504
Miami, FL 33145

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 100 Shares $ 1.00 par value

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

Magali T. Diaz 801 S.W. 74th Ct.
Miami, FL 33126

Prepared by: Magali T. Diaz
1699 Coral Way, Suite 504
Miami, FL 33145
(305) 858-4490

H95000002918

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

Magali T. Diaz 801 S.W. 74th Ct. Miami, Fl 33126

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 14th day of March, 1995.

Signature(s) of incorporator(s)

Magali T. Diaz

[illegible]

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: [illegible] Medical Rental & Supply, Inc.

2. The name and address of the registered agent and office is:

[illegible] J. Diaz
(P.O. BOX NOT ACCEPTABLE)

[illegible] S.W. 74th Ct. Miami, FL [illegible]
(CITY/STATE/ZIP)

SIGNATURE: ______________
(Corporate Officer)

TITLE: Director

DATE: 3/14/95

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE: ______________

DATE: 3/14/95

REGISTERED AGENT FILING FEE

[illegible]