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Robert-Sanchez

Regulator's Name

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CORPORATION(S) NAME

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Acknowledgment

W.P. Verifier

MPIRE Toll Free: 1-800-432-3028

ARTICLES OF INCORPORATION

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SANZ MEDICAL EQUIPMENT AND SUPPLY HOUSE, CORP.

ARTICLE I

The name of the Corporation shall be SANZ MEDICAL EQUIPMENT AND SUPPLY HOUSE, CORP.

ARTICLE II

The Corporation may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE III

There shall be authorized ONE THOUSAND (1000) SHARES of Common Stock at a par value of ONE DOLLAR (\$1.00) per share.

ARTICLE IV

The Corporation shall not begin business with less than ONE THOUSAND DOLLARS (\$1000.00) capital.

ARTICLE V

The Corporation shall have perpetual existence.

ARTICLE VI

The principal office of the Corporation shall be located at: 55 West 16th Street, #1, Hialeah, Fl. 33010

ARTICLE VII

The Corporation shall have 1 Director:

Esperanza Sanz, Pros., Vice Pros., Soc., Treas. 55 West 16th Street, #1 Hialoah, Fl. 33010

and shall hold office set opposite their names for the first year of existence of the Corporation or until their successors are elected or appointed and have qualified. The street address of the Directors is: 55 West 16th Street #1 Hialeah, Fl. 33010

ARTICLE VIII

ESPERANZA SANZ, does hereby each subscribe to ONE THOUSAND (1000) shares of Common Stock, and is the signatory of these Articles of Incorporation. The street address of the subscriber is:

55 West 16th Street, #1 Hialeah, Fl. 33010

ARTICLE IX

ESPERANZA SANZ shall be the Resident Agent of the Corporation. The street address of the registered office and Resident Agent is: 55 West 16th Street, #1 Hialeah, Fl. 33010

IN WITNESS WHEREOF, the undersigned have hereunto set their hands and seals on - 1011 14, 1995

ADDRESS:

55 Wost 16th Street, #1 Hialcah, Fl. 33010

ESPEKANZA SANZ

STATE OF FLORIDA: COUNTY OF DADE:

I HEREBY CERTIFY THAT on this day before me, an officer duly qualified to take acknowledgments, personally appeared ESPERANZA SANZ, to me known to be the person whose names are subscribed to the foregoing instrument and who acknowledged before me that they executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and seal at DADE County, Florida, on April 14, 1995

Personally Known or Produced Identification X
Type of identification produced Dnyers Linears

TD = 3520-200-47-875-0

NOTARY,

MY COMMISSION EXPIRES:

OFFICIAL NOTARY SEAL. ERMIZ HERNANDEZ NOTARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC315511 MINISSION EXP. MAY 6,1997

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said Act:

First-- That SANZ MEDICAL EQUIPMENT AND SUPPLY HOUSE, CORP. desiring to organize under the laws of the State of FLORIDA with its principal office, as indicated in the Articles of Incorporation at City of Hialeah, County of Dade State of FLORIDA has named ESPERANZA SANZ, located at 55 West 16th Street, #1, City of Hialeah, County of Dade, State of Florida, as its agent to accept service of process within this state.

ACKNOWLEDGEMENT: (MUST BE SIGNED BY AGENT)

Having been named to accept service of process for the above stated Corporation, at place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

BY: X CAUCAGO MAUE