

REFERENCE : 621503 156159A

COST LIMIT : \$ 70.00

COST LIMIT : \$ 70.00 ORDER DATE : June 16, 1995 ORDER TIME : 3102 PM 400001515924 ORDER NO. 1 621503 CUSTOMER NO: 156159A Mr. Charles Swanson MR. CHARLES SWANSON CUSTOMER: 1300 N.w. 87th Terrace BINISTOR OF COMPORATION Coral Springs, FL 33071 147 DOMESTIC FILING 1:1 PI 4: I4 NAME: HOLLYHOUNT MEDICAL INTERNATIONAL, INC. ARTICLES OF INCORPORATION SECRETARY OF STATE TALLAHASSEE, FLORIDA CERTIFICATE OF LIMITED PARTNERSHIP JUN 16 AH 11: 59 PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Debbie Skipper EXAMINER'S INITIALS:

ARTICLES OF INCORPORATION
OF

95 JUN 16 AN II: 59
TALLAHASSEE, FLORIDA

HOLLYMOUNT MEDICAL INTERNATIONAL, INC.

The undersigned incorporator hereby forms a corporation under Chapter 607 of the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

HOLLYMOUNT MEDICAL INTERNATIONAL, INC.

The address of the principal office of this corporation shall be 1300 Northwest 87th Terrace, Coral Springs, Florida 33071, and the mailing address of the corporation shall be the same.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in 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 maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares of common stock having no par value per share.

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be 1201 Hays Street, Tallahassee, Florida 32301, and the name of the initial registered agent of the corporation at that address is Corporation Service Company.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. DIRECTORS

All corporate powers shall be exercised by or under the authority of, and the business and affairs of the corporation managed under the direction of its Board of Directors, subject to any limitation set forth in these Articles of Incorporation. This corporation shall have one Director, initially. The name and address of the initial member of the Board of Directors are:

Irene C. Swanson 1300 Northwest 87th Terrace Coral Springs, Florida 33071

ARTICLE VII. INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation:

Corporate Agents, Inc. 1201 Hays Street Tallahassee, Florida 32301

The undersigned incorporator has executed these Articles of Incorporation on June 16, 1995.

Incorporator Its Agent, Gail Shelby

ACCEPTANCE OF REGISTERED AGENT DESIGNATED IN ARTICLES OF INCORPORATION

Corporation Service Company, a Delaware corporation authorized to transact business in this State, having a business office identical with the registered office of the corporation named above, and having been designated as the Registered Agent in the above and foregoing Articles, is familiar with and accepts the obligations of the position of Registered Agent under Section 607.0505, Florida Statutes.

Bv:

Its Agent, Gail Shelby
Authorized Service Representative

uthorized Service Representative Corporation Service Company

P95000047427

OFFICE USE ONLY ምነመመመጠበበ 1 65 ም 1 % የነኝነ - [በረምር/45 -- 11 101 -- 61 8 - እንደተቀየበር ከበ - የትንተታ 35 በበ CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time _ Certified Copy Mail out Will wait Photocopy Certificate of Status **NEW FILINGS AMENDMENTS** Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawai Other Merger **OTHER FILINGS** REGISTRATION/ QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation NOV 1 3 1995 Reinstatement Trademark Examiner's Initials Other

CR2E031(10/92)

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 31, 1995

DIABETIC SUPPLY OF HOLLY MOUNT P.O. BOX 771196 CORAL SPRINGS, FL 33077

SUBJECT: HOLLYMOUNT MEDICAL INTERNATIONAL, INC. Ref. Number: P95000047427

ENISION OF CORPORATIONS

We have received your document for HOLLYMOUNT MEDICAL INTERNATIONAL, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must include original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6909.

Letter Number: 995A00048733

Velma Shepard Corporate Specialist

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

Florida Department of State, Jim Smith, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607,0502, 617,0502, 607,1508, or 617,1508, Florida Statutes, the undersigned corporation organized under the laws of the State of _ submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1a. The name of the corporation is $\alpha \omega \omega \rho$ 1b. The mailing address of the corporation is: 1c. Date of incorporation: TUNE 16.1991 Document number: 2. The name and address of the current registered agent and office: 3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical. Such change was authorized by resolution duly adopted by its board of directors on by ansofficer so authorized by the board. C. Swan (Signature of an officer, chairman or vice chairman of the board) SWANJON ITTERE C. (Printed or typed name and title) Having been named as registered agent and to accept service of process for the above stated corporation, Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. (Signature of Registered Agent)

FILING FEE: \$35.00