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TEXE X95 FLORIDA DIVISION OF CORPORATIONS
6:41 PM PUBLIC ACCESS SYSTEM (((H95000008614))) ELECTRONIC FILING COVER SHEET TO: DIVISION OF CORPORATIONS FROM: FILINGS, INC. DEPARTMENT OF STATE 3732 NW 16TH ST STATE OF FLORIDA 409 EAST GAINES STREET FT LAUDERDALE FL 33311- TALLAHASSEE, FL 32399 CONTACT: TERESA ROMAN FAX: (904) 922-4000 PHONE: (904) 385-6735 FAX: (904) 385-6761 (((H95000008614))) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A. NAME: A.N.M. MEDICAL EQUIPMENT, INC. FAX AUDIT NUMBER: H95000008614 CURRENT STATUS: REQUESTED DATE REQUESTED: 08/04/1995 TIME REQUESTED 18:41:20 CERTIFIED COPIES: 1 CERTIFICATE OF STATUS: 0 NUMBER OF PAGES: 3 METHOD OF DELIVERY: MAIL ESTIMATED CHARGE: $122.50 ACCOUNT NUMBER: 072720000101 Note: Please print this page and use it as a cove sheet when submitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember t type the Fax Audit number on the top and bottom of all pages of the document. (((H95000008614))) ** ENTER 'M' FOR MENU. **

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ARTICLES OF INCORPORATION

OF

A.N.M. MEDICAL EQUIPMENT, INC.

I, the undersigned, hereby make, subscribe and acknowledge these Articles of Incorporation for the purpose of becoming a corporation under the laws of the State of Florida.

1. The name of the corporation shall be A.N.M. MEDICAL EQUIPMENT, INC. and its existence shall be perpetual.

2. The general nature of the business to transact any lawful business for which corporations may be incorporated under the laws of the State of Florida and to have all other powers provided by the laws of the State of Florida.

3. The capital stock of the corporation shall consist of one hundred (100) shares of One ($1.00) Dollar par value.

4. The principal office of the corporation shall be 8456 SW 40 Street, Miami, Florida, 33155.

5. The amount of capital with which the corporation shall begin business is ONE HUNDRED ($100.00) Dollars.

6. The number of the directors shall be at least one (1) and the name and post office address of the first Board of Directors and Officers are:

NAME	OFFICE	POST OFFICE ADDRESS
Nelly Gonzalez	Pres./Secretary/Treasurer Director	8456 SW 40 Street Miami, Florida 33155

7. The name and post office address of the sole subscriber to this Certificate of Incorporation, the number of shares he agrees to take and the consideration thereof, the proceeds of which will amount to at least One Hundred ($100.00) Dollars is as follows:

NAME	NO. OF SHARES	CONSIDERATION
H. Jeffrey Cutler, Esq. 241 Sevilla Avenue Suite 805 Coral Gables, FL 33134 305-446-0100 BAR #350230	100	$100.00

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8. The corporation designates J. JEFFREY CUTLER, ESQ. of 241 Sevilla Avenue, Suite 805, Coral Gables, Florida 33134 as its Registered Resident Agent, to accept service of process within this state.

IN WITNESS WHEREOF, the undersigned hereby subscribes to these Articles of Incorporation at Miami, Dade County, Florida this 4th day of August, 1995.

J. JEFFREY CUTLER, ESQ.

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

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

First, that A.N.M. MEDICAL EQUIPMENT, INC., desiring to organize under the laws of the State of Florida with its principal offices as indicated in the Articles of Incorporation has named H. Jeffrey Cutler, Esq., located at 241 Sevilla Avenue, Suite 805, Coral Gables, Florida, 33134, as Registered Resident Agent to accept Service of Process within this State.

Having been named to accept Service of Process for the above stated corporation at the place designated in this Certificate, I hereby accept to act in this capacity and agree to comply with the provisions of said Act relative to keeping open said office.

H. JEFFREY CUTLER, ESQ.
(Registered Resident Agent)

STATE OF FLORIDA)
:
COUNTY OF DADE)

BEFORE ME, the undersigned authority, this 4th day of August, 1995, personally appeared, H. JEFFREY CUTLER, ESQ., sole subscriber, to me known to be the person described in and who executed the foregoing Articles of Incorporation, who acknowledged before me that he subscribed thereto and did so for the purpose and uses therein mentioned and said H. JEFFREY CUTLER, ESQ. consented to his appointment as Registered Resident Agent of the corporation to accept service of process within this State and did take an oath.

Alicia Varela
NOTARY PUBLIC, State of Florida

My Commission Expires:

OFFICIAL NOTARY SEAL
ALICIA VARELA
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC356656
MY COMMISSION EXP. JUNE 23,1997

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