# CAPITAL CONNECTION INC. DOWN 5526

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302 TOLL FREE No. 1-800-342-8062 FAX (904) 222-1222

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Please remit invoice number with payment TERMS: NET 10 DAYS FROM INVOICE DATE 1 1/2% per month on Past Due Amounts Past 30 Days, 18% per Annum.

THANK YOU from Your Capital Connection

### ARTICLES OF INCORPORATION

96 FEB 13 PK 1:40

OF

SEURE WAY OF STATE TALLAHASSEE, FLORIDA

## SOMNO MED., INC.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

#### ARTICLE I: NAME

The name of the corporation is SOMNO MED., INC.

#### ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 5900 S.W. 127th Avenue, Apt. 3216, Miami, FL 33183.

#### ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one thousand (1,000) shares having a par value of (\$1.00) per share.

#### (,)

#### ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is FRANK RIVERO, 5900 S.W. 127TH AVENUE, APT. 3216, MIAMI, FL 33183.

#### ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

#### ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of the initial Board of Directors of the corporation is FRANK RIVERO, PRESIDENT & TREASURER, 5900 S.W. 127th AVENUE, APT. 3216, MIAMI, FL 33183.

The undersigned has executed these Articles of Incorporation this 13th day of February 1996.

"Capital Connection, Inc. by Kim Crosson, Client Representative"

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

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SECRETATION STATE TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the state of Florida, submite the following statement in designating the registered office/registered agent, in the state of Florida.

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HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE PROCESS THE ABOVE STATED CORPORATION AT THE PLACE FOR DESIGNATED IN THIS CERTIFICATE, 1 HEREBY ACCEPT APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

FRANK RIVERD