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TALLAHASSEE, FLORIDA

2-20-96

Miami Review

Requester's Name

Address

City

State

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Phone

VALIDATION ONLY

200001721252
02/22/96-01029-017
****122.50 ****122.50

CORPORATION(S) NAME

MediHealth Care Supplies Corporation

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DIVISION OF CORPORATION
Toll Free: 1-800-432-3028

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|--|---|---|
| <input checked="" type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | <input type="checkbox"/> Dissolution | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Foreign | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Reservation | <input type="checkbox"/> Change of Registered Agent |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> Certificate Under Seal |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call if Problem |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Will Wait | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk-In | <input checked="" type="checkbox"/> Pick Up | <input type="checkbox"/> Mail Out |

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F. CHESSEY FEB 22 1996

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF

MediHealth Care Supplies Corporation

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

ARTICLE I

The name of the corporation shall be:

MediHealth Care Supplies Corporation

ARTICLE II

The principal place of business and mailing address of this corporation shall be:

13800 S.W. 8th Street, Suite 212
Miami, FL 33184

ARTICLE III

The number of shares of stock that this corporation is authorized to have outstanding at any time is:

500 shares (five hundred) @
\$ 1 (one dollar)

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Raimundo Levi
c/o Lopez Levi & Associates P.A.
815 NW 57th Avenue, Suite 304
Miami, FL 33126

ARTICLE V INCORPORATOR(S).

The name(s) and street address(es) of the incorporator to these Articles of Incorporation is (are):

Alicia Tames, President
13800 S.W. 8th Street, Suite 212
Miami, Fl 33184

The undersigned has(have) executed these Articles of Incorporation this 13th day as of February, 1996.


Signature/Title


CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statute, 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.

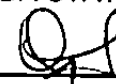
1. The name of the corporation is: MediHealth Care Supplies Corporation
2. The name and address of the registered agent and office is:

Raimundo Levi
c/o Lopez Levi & Associates P.A.
815 NW 57th Avenue, Ste 304
Miami, FL 33126

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TALLAHASSEE, FLORIDA

Signature 
Title Registered Agent
Date 2-13-96

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFIED, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL MY STATUS 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 2-13-96