P9600035859

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	1 0-771 1-3		=
(name - must include suffix)	200001748812 -03/19/9601053012 *****78.75 *****78.75
for: \$70.00 Filing Fee	11 and one (1) co \$\infty \frac{1}{2} \pm\$78.75 Filing Fee & Certificate	\$122.50 \$131 Filing Fee Filing Fee & Certified Copy & Certified Copy & Certified Copy & Certificational Copy Required	25 e, opy ate
FROM:	KEN Name 9390	MADRID (printed or typed) SW 1 ST ST, Address	- g/25/96 TB
	PLANT.	ATION, FL 33 y, State & Zip	3324
	(800) Daytime	982-1209 Telephone number	_

KIM CARDIONASCULAR, INC.

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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 U NAME

The name of the corporation shall be:

K+M CARDIOVASCULAR, INC.

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SECRETARISEE, FLORIC
TALLAMASSEE, FLORIC

ARTICLE II PRINCIPAL OFFICE

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

9390 SW 1ST St. PLANTATION, FL 33324

ARTICLE III SHARES

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

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

KEN MADRID - President 9390 SW 1st St. PLANTATION, FL 33324 ARTICLE V INCORPORATOR(S)

See	Instructions	s for officer	rs/directors
		, [//] //	

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

- 1) KEN MADRID 9390 SWIST St. Plentition, FL 33324
- 2) Sale of medical supplies and related services.
- 3) KEN MADRID President + Secretary

4)

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

19th day of March , 19 96.

(An additional article must be added if an effective date is requested.)

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, 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:	K+M CARDIOVASCU	-
2. The name and address of the regi	stered agent and office is:	E CALLAND
KEN	MADRID (NAME)	LED HE SECOND
	SW 154-54 ox or Mail Drop Box <u>NOT</u> acceptable)	24 08:07
PLAN	TATION FL 33324 (CITY/STATE/ZIP)	

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the 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.

(SIGNATURE) (DATE)