4/11/ FLORIDA DIVISION OF CORPORATIONS 12:05 PM PUBLIC ACCESS SYSTEM ECTRONIC F. LAGLE ST ST ORMONT PHONE: (305) 541-3694 FAX: (305) 541-3770 11980000006411))) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A. NAME: MED CARE HEALTH PRODUCTS, INC. CURRENT STATUS: REQUESTED FAX AUDIT NUMBER: H98000008411 DATE REQUESTED: 04/17/1996 TIME REQUESTED: 12:05:32 CERTIFICATE OF STATUS: 0 CERTIFIED COPIES: 1 NUMBER OF PAGES: 4 METHOD OF DELIVERY: FAX ESTIMATED CHARGE: \$122.50 ACCOUNT NUMBER: 072450003255 Note: Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations, Your document cannot be processed without the information contained on this page. Remember to type the Fax Audit number on the top and bottom of all pages of the document. (((H96000005411))) ** ENTER 'M' FOR MENU. ** ENTER SELECTION AND (CR): Help F1 Option Manu F2 NUM

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ARTICLES OF INCORPORATION

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MED CARE HEALTH PRODUCTS, INC.

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, do hereby adopt the following articles of incorporation:

ARTICLE ONE NAME

The name of the corporation is MED CARE HEALTH PRODUCTS, INC.

ARTICLE TWO CORPORATE DURATION

The duration of the corporation is to be perpetual.

ARTICLE THREE PURPOSE

The corporation may engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE FOUR CAPITALIZATION

The aggregate number of shares which the corporation is authorized to issue is 10,000 shares. Such shares shall be of a single class, and shall have a par value of One Dollar (\$1.00) per share.

ARTICLE FIVE PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be 600 West 20th Street, Hisland, Florida 33010.

ARTICLE SIX REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the corporation is 2701 S.W. LoJeune Road, Suite 401, Coral Gables, Florida 33134, and the name of its initial registered agent, is Jose R. Pujols, Esq.

1

Jose R. Puiols, Esq. 2701 S. Lefende Rd. #401 Coral Gables, 3C 33134 (308) 569, 9533 Th. Box NO. 936911

ARTICLE SEVEN DIRECTORS

The number of directors constituting the initial board of directors of the corporation shall be not less than One (1). The name and address of each person who is to serve as a member of the initial board of directors is:

Namo

Address

Wilfred Braceras

600 West 20th Street Hisleah, Florida 33010

ARTICLE EIGHT INCORPORATORS

The name and address of each incorporator is:

Name

Address

Jose R. Pujois

2701 S.W. LeJeune Road, Suite 401 Coral Gables, Florida 33134

ARTICLE NINE INDEMNIFICATION

This corporation shall indemnify and may insure its officers and directors to the fullest extent permitted by law.

ARTICLE TEN AMENDMENTS

These articles of incorporation may be amended in the manner authorized by at the time of amendment.

IN WITNESS WHERETO, I, Jose R. Pujuls, being the incorporator of this corporation, make and file these articles of incorporation this 4th day of April 1995.

Jose R. Pulole (FRN: 9260

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CERTIFICATE DESIGNATING PLACE OF BUSINESS FOR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SKRVED

IN COMPLIANCE WITH SECTION 607.0501, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

THAT MED CARE HEALTH PRODUCTS, INC., DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF PLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT:

600 West 20th Street Hisland, Florida 33010

HAS NAMED JOSE R. PUJOLS, LOCATED AT 2701 S.W. LEJEUNE ROAD, SUITE 401, CORAL GABLES, FLORIDA, 33134, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

Jose R. Pujols, Incorporator

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, ALT THE PLACE DESIGNATED IN THE CERTIFICATE, I HERBY AGREE TO ACT IN THIS CAPACITY, AND FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF, ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

Inea B. Puin

FILED

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SECRETARY OF STATE
TALLAHASSEE, FI ORDE.