

5/23/96

FLORIDA DIVISION OF CORPORATIONS
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MIAMI FL 33135-

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TALLAHASSEE, FL 32399

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DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.

NAME: MEDICAL REMEDIES, INC.

FAX AUDIT NUMBER: H96000007297

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TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

96 MAY 23 PM 2:43

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ARTICLES OF INCORPORATION
OF
MEDICAL REMEDIES, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - NAME

The name of this corporation is MEDICAL REMEDIES, INC.

ARTICLE II - PRINCIPAL OFFICE

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

12550 Biscayne Blvd #305 North Miami, FL 33181

ARTICLE III - DURATION

This corporation shall have perpetual existence commencing on the date of the filing of these Articles with the Department of State.

ARTICLE IV - PURPOSE

This corporation is organized for the purpose of transacting any or all lawful business.

ARTICLE V - CAPITAL STOCK

This corporation is authorized to issue 100 shares of \$1.00 par value common stock which shall be designated "Common Shares".

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is

12550 Biscayne Blvd #305 North Miami,

FL 33181 and the name of the initial registered agent of this corporation at

that address is BILL SWAN.

Prepared by:
Kim Marks, CPA, PA
12550 Biscayne Boulevard - 402
North Miami, FL 33181
(305) 695-5815

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ARTICLE VII - INCORPORATORS

The names and address of each person signing these Articles is:

NAME	ADDRESS
BILL SWAN	12550 Biscayne Blvd Suite 301 North Miami, FL 33181
BARRY STERN	218 NW 143 STREET MIAMI FLORIDA 33168

ARTICLE VIII - AMENDMENT

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this May 28, 1996.

[Signature] pw
Signature/Title

[Signature] - up.
Signature/Title

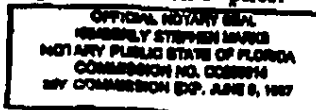
STATE OF FLORIDA
COUNTY OF DADE

Before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared BILL SWAN, BARRY STERN, the persons who executed the foregoing Articles of Incorporation, and they acknowledged before me that they executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the State and County aforesaid, this May 28, 1996.

[Signature]
Notary Public, State of Florida at Large

My commission Expires:



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

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST--THAT MEDICAL REMEDIES, INC.
(Name of Corporation)

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF NORTH Miami, STATE OF FLORIDA, HAS NAMED BILL SWAN, LOCATED AT 12550 Biscayne Blvd # 825, STATE OF FLORIDA, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE [Signature]
(Corporate Officer)

TITLE President

DATE 5/20/96

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TALLAHASSEE, FLORIDA

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

SIGNATURE [Signature]
(Resident Agent)

DATE 5/20/96

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