TON OF CURP IDLIC ACCEBB BYST ELECTRONIC FILING COVER SHEET (((H TO DIVISION OF CORPORATIONS FROM: FAB-T CORP. AGENTS, INC. DEPARTMENT OF STATE 8405 NW 53RD ST STATE OF FLORIDA BUITE C-100 409 EAST GAINES STREET MIAMI FL 33166-FL 33418-0000 TALLAHABBEE, FL 32399 CONTACT: LIDIA **FERNANDEZ** FAX: (904) 922-4000 PHONE: (305) 599-0839 FAX: (305) 592-9591 (((H960000007460))) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A. NAME: ALL CARE MEDICAL SUPPLIES CORP. FAX AUDIT NUMBER: H96000007460 CURRENT STATUS: REQUESTED DATE REQUESTED: 05/28/1996 TIME REQUESTED: 12:53:52 CERTIFICATE OF STATUS: Ø CERTIFIED COPIES: 1 METHOD OF DELIVERY: FAX NUMBER OF PAGES: 3 ESTIMATED CHARGE: \$122.50 ACCOUNT NUMBER: 071001002335 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. (((H96000007460))) ** ENTER 'M' FOR MENU. ** 5/28/96 FLORIDA DIVISION OF CORPORATIONS 12:54 PM

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SECRETARY OF STATE
TALLAHASSEE, FLORID.

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II, 1310H OF CORPORATIONS

BECEINED

ARTICLES OF INCORPORATION

QΕ

ALL CARE MEDICAL SUPPLIES CORP.

SECRETARY OF STATE

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

ARTICLE | NAME

The name of the corporation shall be: All Care Medical Supplies Corp.

The principal place of business of this corporation shall be: 7601 NW 68th Street Suite 102, Mismi, FL 33166

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its per value that this corporation is authorized to have outstanding at any one time is: one thousand shares (1,000) common par value \$1.00

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the Initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s)

is(are) elected, is(are): Prepared by: Tax Professional's Corp.

1941 W. 68th Street Hialeah, FL 33014 (305) 824-0144 Rafael Romero 7601 NW 68th Street Suite 102 Miami, FL 33166

ATTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is (aro):

Rafael Romero 7601 NV 68th Street Suite 102 Miami, FL 33166

IN WITNESS WHEREOF, the unders	signed incorporator(s) has(have) executed these
Articles of Incorporation this 28th	day of May	, 19 <u>96</u> ,

Signature (s) of Incorporator(s)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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: All care medical supplies Corp.		
2.	The name and address of the registered agent and office is:		
	Rafael Romero 7601 NW 68th Street Suite 102	96 жү	
	Mtant, FL 33166 CITY/STATE/ZIP)	Y 28	FILE
	FLORIN	S: -	ED
	SIGNATURE John Comen	14	
	TITLE Director		
	DATE May 28th, 1996		
HA	IVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED	2	
TO	DRPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE O ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE IOVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PER	= -	
FO TIC	ORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECON 607.325, FLORIDA STATUTES.	•	
	SIGNATURE J of Homens		
	DATE May 28th 1996		

8/26/97

FLORIDA DIVIBION OF CORPORATIONO PUBLIC ACCEBS SYSTEM ELECTRONIC FILING COVER SHEET

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TOI DIVISION OF CORPORATIONS

FAX #: (850)922-4000

1:55 PM

FROM: FAS-T CORP. AGENTS, INC.

ACCT#: 071001002335

CONTACT: LIDIA FÉRNANDEZ PHONE: (305)599-0839

FAX #: (305)716-0346

NAME: ALL CARE MEDICAL SUPPLIES CORP.

AUDIT NUMBER..... H97000014086 DOC TYPE......BASIC AMENDMENT CERT. OF STATUS. 0

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FAX #1 (850)922-4000

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FAX #: (305)716-0346

NAME: ALL CARE MEDICAL SUPPLIES CORP.

AUDIT NUMBER..... H97000014086

DOC TYPE..... BASIC AMENDMENT

CERT. OF STATUS...

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8/26/97

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FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

August 27, 1997

ALL CARE MEDICAL SUPPLIES CORP. 7601 N.W. 68TH STREET SUITE 102 MIANI, FL 33166

SUBJECT: ALL CARE MEDICAL SUPPLIES CORP.

REF: P96000045171

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

Please state what Article VI is amending.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6906.

Darlene Connell Corporate Specialist FAX Aud. #: H97000014086 Letter Number: 797A00043131

ARTICLES OF AMENDMENT

TO

AKTICLES OF INCORPORATION

OF

AIL CARE MEDICAL SUPPLIES COST.

Pursuant to the provisions of section 607.1006. Florida Statutes, this corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: (indicate anicle number(s) being amended, added or deleted)

SECOND: ARTICLE V

ADD: Keila I. Outierrez, Director 7601 NW 68th STREET, SUITE 102 MIAMI, PLORIDA 33166

DELETE: Rafael Romaro, Director 7601 NW 68th STREET, SUITE 102 MIAMI, FL 33166

OT AUG 28 PH 1: 30

Prepared by: Tax Professionals 1941 W. 68 Street Hislanh, FL 33014

SECOND: If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

Prepared by: Tax Professionals 1941 W. 68th St. Hialeah, Fl 33014 (305) 824-0144

TH	IRD:	The date of each amendment's adoption: July 25, 1997
FO	URTH	Adoption of Amendment(s) (dieck one)
		mendment(s) was/were approved by the shareholders. The number of vote r the amondment(s) was/were sufficient for approval.
	Theat	mendment(s) was/were approved by the shareholders through veting groups
		The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
		"The number of votes cast for the amendment(s) was/were sufficient for approval by (voting group)
(X)	The ar	nendment(s) was/were adopted by the board of directors without older action and shareholder action was not required.
Ц	Thour	nendment(s) was/were adopted by the incorporators without shareholder and shareholder action was not required.
	Sign	ed this 25 day of <u>NILY</u> , 19 97
		Signature Hoffel Domeso
		President or other officer is ecopied by the shareholders. OR
		(By a director if adopted by the directors) OR
		(By an incorporator if adopted by the incorporators)
		Refael Romero
		Typed or printed name
-		DEPOTOR
		Tide