P96000047914

** ENTER NUMBER OF YOUR CHOICE **
6/05/96 FLORIDA DIVISION OF CORPORATIONS 1:52 PM
PUBLIC ACCESS SYSTEM
(((H96000007887))) ELECTRONIC FILING COVER SHEET
TO: DIVISION OF CORPORATIONS FROM: FAB-T CORP. AGENTS, INC.
DEPARTMENT OF STATE 8405 NW 53RD ST
STATE OF FLORIDA SUITE C-100
409 EAST GAINES STREET MIAMI FL 33166- - 0
TALLAHASSEE, FL 32399 CONTACT: LIDIA FERNANDEZ
FAX: (904) 922-4000 PHONE: (305) 599-0839
FAX: (305) 592-9591

(((H96000007887))) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
NAME: FAST SERVICE MEDICAL EQUIPMENTS, CORP.
FAX AUDIT NUMBER: H96000007887 CURRENT STATUS: REQUESTED
DATE REQUESTED: 06/05/1996 TIME REQUESTED: 13:52:25
CERTIFIED COPIES: 1 CERTIFICATE OF STATUS: 0
NUMBER OF PAGES: 3 METHOD OF DELIVERY: FAX
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.

(((H96000007887)))
** INVALID SELECTION...PLEASE RE-ENTER **
6/05/96 FLORIDA DIVISION OF CORPORATIONS 1:53 PM
PUBLIC ACCESS SYSTEM

FILED
96 JUN -5 PM 5:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
96 JUN -5 PM 3:17
DIVISION OF CORPORATIONS

FILED
96 JAN -5 PM 5:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE OF INCORPORATION

OF

FAST SERVICE MEDICAL EQUIPMENTS, CORP.

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 I NAME

The name of the corporation shall be: FAST SERVICE MEDICAL EQUIPMENTS, CORP

The principal place of business of this corporation shall be:

1000 Ponce de Leon Boulevard, Suite 118
Coral Gables, Fl. 33134

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 State, 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 par value that this corporation is authorized to have outstanding at any one time is: 100 x $ 10.00= $ 1,000.00

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

Prepared by: Basic Accounting Service
692 W. 29th St. Ste. #09
Hialeah, Fl 33012
(305) 887-4185

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(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):

Hugo Gutierrez — Director
1327 SW. 72 Ave.
Miami, Fl.33144

ARTICLE VI INCORPORATOR(S)

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

Hugo Gutierrez — President,Secretary & Treasurer
1327 SW. 72 Ave. — 100 shares
Miami, Fl.33144

The undersigned has(have) executed these Article of Incorporation this 5 th. day of June, 1996.

✓ _____
Signature/Title

_____
Signature/Title

_____
Signature/Title

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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:

Fast Service Medical Equipments, Corp.

2. The name and address of the registered agent and office is

Hugo Gutierrez
(Name)

1327 SW. 72 Ave.
(P. O. BOX NOT ACCEPTABLE)

Miami, Fl.33144
(CITY/STATE/ZIP)

FILED
96 JUN -5 PM 5:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESI AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FUR THER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMACE OF MY DUTIES AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS MY POSITION AS REGISTERED AGENT.

SIGNATURE

DATE 6-5-96