

TRANSMITTAL LETTER

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QUALITY INFUSION CARE, INC.
(Proposed corporate name - must include suffix)

Additional Copy Required

Name (printed or typed)

Address

City, State & Zip

Daytime Telephone number

GB 6/20/96

ARTICLES OF INCORPORATION FOR QUALITY INFUSION CARE, INC.

6106 WATERS WAY
SPRINGHILL, FL 34607

ARTICLE I - NAME

THE NAME OF THE CORPORATION SHALL BE:

QUALITY INFUSION CARE, INC.

ARTICLE II - PRINCIPLE OFFICE

THE PRINCIPLE PLACE OF BUSINESS AND MAILING ADDRESS OF THE CORPORATION SHALL BE:

6106 WATERS WAY
SPRINGHILL, FLA 34607

ARTICLE III - SHARES

THE NUMBER OF SHARES THIS CORPORATION IS ALLOWED TO HAVE OUTSTANDING AT ANY ONE TIME IS 5,000 SHARES OF TEN CENT (S 10) PAR VALUE SHARES, WHICH SHALL BE DESIGNATED COMMON SHARES.

ARTICLE IV - INITIAL REGISTERED AGENT

VERN ALLEN
6106 WATERS WAY SPRINGHILL, FL 34607

ARTICLE V - INCORPORATE(S)

THE NAME OF THE PERSON SIGNING THESE ARTICLES OF INCORPORATION IS

VERN ALLEN
6106 WATERS WAY
SPRINGHILL, FLA 34607

ARTICLE VI INITIAL BOARD OF DIRECTORS

THIS CORPORATION SHALL HAVE ONE DIRECTOR INITIALLY. THE NUMBER OF DIRECTORS MAY CHANGE ACCORDING TO THE BY-LAWS BUT WILL NEVER BE LESS THAN ONE. THE NAME AND ADDRESS OF THE INITIAL DIRECTOR OF THIS CORPORATION IS:

VERN ALLEN 6105 WATERS WAY
SPRINGHILL, FLA. 31607

THE UNDERSIGNED INCORPORATE HAS EXECUTED THESE ARTICLES OF INCORPORATION
THIS 17 DAY OF June 1996

SIGNATURE



**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:

QUALITY INFUSION CARE, INC.

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

VERN ALLEN
(NAME)

6106 WATERS WAY
(P.O. Box or Mail Drop Box ~~NOT~~ ACCEPTABLE)

Springhill, AL 34607
(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.

Vern Allen
(SIGNATURE)

6-17-96
(DATE)