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FROM: FAS-T CORP. AGENTS, INC.
8405 NW 53RD ST
SUITE C-100
MIAMI FL 33166- - 0
CONTACT: LIDIA FERNANDEZ
PHONE: (305) 599-0839
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(((H96000008982))) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
NAME: A HELPING HAND MEDICAL SUPPLIES, INC.
FAX AUDIT NUMBER: H96000008982 CURRENT STATUS: REQUESTED
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# ARTICLES OF INCORPORATION

# OF

A HELPING HAND MEDICAL SUPPLIES, INC.

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: A HELPING HAND MEDICAL SUPPLIES, INC.

The principal place of business of this corporation shall be: 1140 W. 50th St. Ste. #202-C
Hialeah, Fl 33012

## 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 par value that this corporation is authorized to have outstanding at any one time is: 100 Shares at $0.01/C Par Value.

## 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):

Domingo Diaz 1140 W. 50th St. Ste. #202-C
Hialeah, Fl 33012

Prepared by: Domingo Diaz
1140 W. 50th St. Ste. #202-C
Hialeah, Fl 33012
(305) 820-1550

## ARTICLE VI INCORPORATOR(S)

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

Domingo Diaz 1140 W. 50th St. Ste. #202-C
Hialeah, Fl 33012

**IN WITNESS WHEREOF**, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 27 day of 6, 1996

Signature(s) of Incorporator(s)

Domingo Diaz

**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: A HELPING HAND MEDICAL SUPPLIES, INC.

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

Domingo Diaz 1140 W. 50th St. Ste. #202-C
(P.O. BOX NOT ACCEPTABLE)

Hialeah, Fl 33012
(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

SIGNATURE Domingo Diaz
(corporate officer)

TITLE DIRECTOR

DATE 6-27 1996

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 AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE Domingo Diaz

DATE 6-27 1996

REGISTERED AGENT FILING FEE: