P96000069987

TRANSMITTAL LETTER

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: MEDICARE OXYGEN INC
(proposed corporate name)

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of $ 70.00.

500000192835
-08/21/96--01054--006
*****70.00 *****70.00

FROM: Linda G. Turner
Name
315 E. CENTRAL AVE SUITE 106-A
Address
WINTER HAVEN FL 33880
City, State, & Zip
(941) 293-0905
Telephone Number

Note: Additional copy of articles is needed when certified copy is requested.

FILED
96 AUG 21 PM 12:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
06 AUG 21 PM 12:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF

MEDICARE OXYGEN INC

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

ARTICLE I NAME

The name of the corporation shall be:

MEDICARE OXYGEN INC.

ARTICLE II PRINCIPAL OFFICE

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

315 E. CENTRAL AVE., SUITE 106-A
WINTER HAVEN FL 33880

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 (ONE-HUNDRED)

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Linda G. Turner
315 E. CENTRAL AVE, SUITE 106-A
WINTER HAVEN FL 33880

ARTICLE V INCORPORATOR(S)

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

MEDICARE OXYGEN INC.
Linda G. Turner
315 E. CENTRAL AVE, SUITE 106 A
WINTER HAVEN FL 33880

The undersigned has(have) executed these Articles of Incorporation this

17th day of August, 19 96.

Linda Turner /PRESIDENT
Signature/Title
Linda Turner

Signature/Title

Signature/Title

CERTIFICATE OF DESIGNATION
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: MEDICARE OXYGEN INC

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

Linda G. Turner
(NAME)

315 E. CENTRAL AVE SUITE 106-A
(P.O. BOX NOT ACCEPTABLE)

WINTER HAVEN FL 33880
(CITY/STATE/ZIP)

FILED
96 AUG 21 PM 12:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SIGNATURE Linda Turner
(corporate officer) Linda Turner

TITLE OWNER

DATE August 17, 1996

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.

SIGNATURE Linda Turner

DATE August 17, 1996

REGISTERED AGENT FILING FEE: $35.00