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CORPORATE ACCESS, INC.

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FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 3, 1996

CORPORATE ACCESS, INC.

TALLAHASSEE.

SUBJECT: QUALITY MEDICAL SUPPLIES, INC.

Ref. Number: W96000020899

We have received your document for QUALITY MEDICAL SUPPLIES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

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EFFECTIVE VILLE

96 DCT -4 MM II: 5 SECRETATAY OF STATE TALLAHASSEE, FLORID

ARTICLES OF INCORPORATION

OF

REHAB EQUIPMENT & SUPPLIES, INC.

ARTICLE I

The name of this corporation is REHAB EQUIPMENT & SUPPLIES, INC.

ARTICLE II

This corporation shall exist perpetually. It shall commence on October 2, 1996.

ARTICLE III

The total number of shares that the corporation has authority to issue is 1000 all of which shall be common shares with a par value of \$1.00 per share.

ARTICLE IV

The street address of the initial registered office of this corporation is 4595 Lexington Avenue, Jacksonville, Fl 32210, and the name of the initial registered agent of this corporation at that address is SHIRLEY MOORE. The above is also the mailing address.

ARTICLE V

This corporation shall have one (1) director initially. The number of directors may either be increased or diminished from time to time by the by-laws, but there shall never be less than one. The name and address of the initial director of this corporation is:

SHIRLEY MOORE

4595 Lexington Avenue Jacksonville, FL 32210

ARTICLE VI

The purpose of this corporation is to engage in all forms of lawful business.

ARTICLE VII

The name and address of the person signing these Articles is SHIRLEY MOORE, 4595 Lexington Avenue, Jacksonville, Florida 32210.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation, this 200 day of October, 1996.

Shinley NiOOpe

STATE OF FLORIDA COUNTY OF DUVAL

Before me, a Notary Public authorized to take acknowledgements, in the state and county set forth above, personally appeared SHIRLEY MOORE, known to me and known by me to be the person who executed the foregoing Articles of Incorporation, and she acknowledged before me that she executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the state and county aforesaid, this AND day of October, 1996.

OFFICIAL NOTARY SEAL
MARIE WELLS
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC258814
MY COMMISSION FXP. FEB. 10,1997

Notary Public, State of Florida at Large.

My commission number: (C258814)

My commission expires: Jet 10, 1997

Consent

I, SHIRLEY MOORE, do hereby consent to the designation in these Articles of Incorporation as registered agent of the corporation.

SHIRLEY MOORE

96 OCT -4 AM II: 57
SECRETARY OF STATE