

**CORPORATE
ACCESS,
INC.**

P960000089227

1116-D Thomasville Road . Mount Vernon Square . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (904) 222-2666 or (800) 969-1666 . Fax (904) 222-1666

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Profit

1.) ~~Heritage Home Medical, Inc.~~
(CORPORATE NAME & DOCUMENT #)

Heritage Home Medical, Inc.

2.) _____
(CORPORATE NAME & DOCUMENT #)

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3.) _____
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10.) _____
(CORPORATE NAME & DOCUMENT #)

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96 OCT 30 AM 9:27
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATION

SPECIAL INSTRUCTIONS _____

"When you need ACCESS to the world"
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mc OCT 30 1996

ARTICLES OF INCORPORATION

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:

Heritage Home Medical, Inc.

ARTICLE II PRINCIPAL OFFICE

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

134 East Call St.
P.O. Box 307
Starke, Fl. 32091

ARTICLE III SHARES

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

500 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Randy Sperring
134 East Call St.
P.O. Box 307
Starke, Fl. 32091

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ARTICLE V INCORPORATOR(S)

See Instructions for officers/directors

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

Randy Sperring
134 East Call St.
P.O. Box 307
Starke, Fl. 32091

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

28th day of October, 1996.

Randy Sperring
Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**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: Heritage Home Medical, Inc.
2. The name and address of the registered agent and office is:

Randy Sperring
(NAME)
134 East Call St.
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)
Starke, FL 32091
(CITY/STATE/ZIP)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.

Randy W. Sperring
(SIGNATURE)

10/28/96
(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314