

P96000095285

TRANSMITTAL LETTER

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

SUBJECT: YULIS MEDICAL SUPPLY, INC.

200002007712--7
-11/19/96--01060--005
*****78.75 *****78.75

Enclosed is an original one (1) copy of the articles of incorporation and check for:

_____\$70.00
Filing Fee

 X \$78.75
Filing Fee &
Certificate

_____\$122.50
Filing Fee &
Certified Copy

_____\$131.25
Filing Fee &
Certified Copy &
Certificate

FROM: A.B.Y. PARALEGAL, INC.
ADDRESS: 175 FONTAINEBLEAU BLVD.
SUITE 2G6A
MIAMI, L 33172
TELEPHONE: 305-226-0800

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

YULIS MEDICAL SUPPLY, INC.

ARTICLE II PRINCIPAL OFFICE

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

10670 SW 24 ST MIAMI, FL 33165

ARTICLE III SHARES

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

1,000 SHARES NO PAR

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name of the initial registered agent is :

**EUGENIO CRUZ
447 SW 78 PLACE MIAMI, FL 33144**

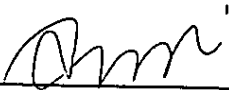
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TALLAHASSEE, FLORIDA

ARTICLE V INCORPORATOR(S)


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

PRESIDENT: EUGENIO CRUZ 447 SW 78 PL. MIAMI, FL 33144
V. PRESIDENT: AMADO E. ROSALES 447 SW 78 PL. MIAMI, L 33144
SECRETARY: NED IBRAHIM 201712 SW 117 CT. MIAMI, FL 33177

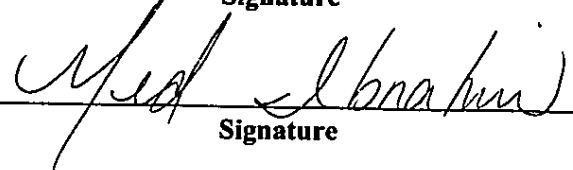
The undersigned incorporator(s) has(have) executed these Articles of Incorporation
this 8TH Day of NOVEMBER, 1996



Signature



Signature



Signature

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, 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:

YULIS MEDICAL SUPPLY, INC.

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

**EUGENIO CRUZ
447 SW 78 PL.
MIAMI, FL 33144**

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

EUGENIO CRUZ
447 SW 78 PL.
MIAMI FL 33144
305-207 7277

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TALLAHASSEE, FLORIDA