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FLORIDA DIVISION OF CORPORATIONS

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TO: DIVISION OF CORPORATIONS
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FAX #:

FROM: BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
075350000353

ACCT#:

CONTACT: CATHY LEACH

PHONE: (212) 431-5000

FAX #:

(212) 431-1441

NAME: DURAMED MEDICAL SERVICES, INC.
AUDIT NUMBER.....H97000002016
DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.
CERT. OF STATUS..0 PAGES..... 2
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H97000002016

ARTICLES OF INCORPORATION
OF
DURAMED MEDICAL SERVICES, INC.

THE UNDERSIGNED sole incorporator, being a natural person competent to contract and desiring to form a corporation under Title XXXV, Chapter 607 of the revised Florida Statutes, herewith submits the following information:

1. The name of the corporation is **DURAMED MEDICAL SERVICES, INC.**
2. The duration of the corporation shall be perpetual.
3. The general purpose or purposes for which this corporation is being formed are to include the transaction of any or all lawful business for which corporations may be incorporated under this chapter.
4. The aggregate number of shares which the corporation shall have authority to issue is **1,000** shares, all without par value and of one class.
5. The principal address and mailing address of the corporation will be **36736 TRAILWOOD CIRCLE, EUSTIS, FL 32736** and the name of its initial registered agent at such address is **BISHOP MCMILLER**.
6. The number of directors constituting the initial board of directors is **ONE** and the name and address of each person who is to serve as a member thereof is as follows:

BISHOP MCMILLER, 36736 TRAILWOOD CIRCLE, EUSTIS, FL 32736
7. The name and address of the sole incorporator is: **ROBERT ARATINGI**, c/o **BLUMBERGEXCELSIOR CORPORATE SERVICES, INC., 62 WHITE STREET, 2ND FLOOR, NEW YORK, NY 10013.**

IN WITNESS WHEREOF, the undersigned, as sole incorporator of this corporation has executed these Articles of Incorporation.

Dated: 02/03/97

BlumbergExcelsior
62 White St.
New York, NY 10013
212-431-5000


ROBERT ARATINGI
Sole Incorporator

H97000002016

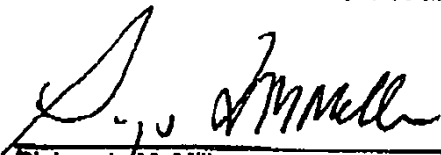
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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THE STATE OF FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

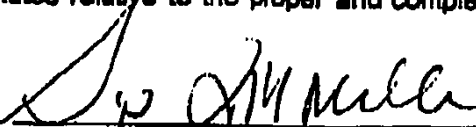
In compliance with Chapter 607.034, Florida Statutes, the following is submitted:

That **DURAMED MEDICAL SERVICES, INC.**, desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at the City of Eustis, State of Florida, has named **Bishop L. McMiller** located at **36736 Trailwood Circle, City of Eustis, State of Florida**, as its agent to accept service of process within Florida.

The street address of the registered office and the street address of the business of the registered agent are identical.


Bishop L. McMiller 2/3/97
President Date

Having been named to accept service of process for the above-named 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.


Bishop L. McMiller
Registered Agent
2/3/97
Date

BlumbergExcelsior
62 White St
New York, NY 10013
212-431-5000

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