COMPANY	ACCOUNT NO. : 072100000032		
	REFERENCE : 292216 4390271		
	AUTHORIZATION:  COST LIMIT: \$ 122.50 cm Parity		
ORDER DATE	: March 13, 1997		
ORDER TIME	: 10:23 AM		
ORDER NO.	: 292216-010		
CUSTOMER N	O: 4390271 1 LUL	WW211291	
CUSTOMER:	Jay R. Beskin, Esq FROMBERG FROMBERG LEWIS & BRECKER, P.A. Suite 505 20801 Biscayne Boulevard Miami, FL 33180-1422		
	DOMESTIC FILING	97 NAR SECONDE	
MAK	E: SUPPORTLIFE RESPIRATORY SYSTEMS, INC.	R 13 AH	
	EFFECTIVE DATE:		
	LES OF INCORPORATION FICATE OF LIMITED PARTNERSHIP	<b>3</b>	
PLEASE RETU	TRN THE FOLLOWING AS PROOF OF FILING:		

CONTACT PERSON: Tonya C. Holliday EXAMINER'S INITIALS:

MAR 1 4 1997 K.R.

#### ARTICLES OF INCORPORATION



# SUPPORTLIFE RESPIRATORY SYSTEMS, INC.



#### ARTICLE I - NAME

The name of this corporation is SUPPORTLIFE RESPIRATORY SYSTEMS, INC., and its mailing address is 4699 N. State Road 7, Suite A, Ft. Lauderdale, FL 33319.

## **ARTICLE II - PURPOSE**

This corporation is organized for the purpose of transacting any or all lawful business.

#### ARTICLE III - CAPITAL STOCK

This corporation is authorized to issue 1,000 shares of one (\$1.00) dollar par value common stock.

# ARTICLE IV - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation and the name of the initial registered agent of this corporation at such address are as follows:

Registered Agent

Street Address of Registered Office

**Dade County Corporate** 

20801 Biscayne Boulevard, Suite #505

Agents, Inc.

Aventura, FL 33180

Attn: Alan J. Lewis, Vice-President

# ARTICLE Y - INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) Director initially. The number of Directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one. The initial Director of this corporation shall be JANICE GAGNE.

## ARTICLE VI - INCORPORATOR

The name and address of the person signing these articles is:

JAY R. BESKIN, ESQ. FROMBERG, FROMBERG, LEWIS & BRECKER, P.A. 20801 Biscayne Boulevard, #505 Aventura, FL 33180

### **ARTICLE VII - INDEMNIFICATION**

The corporation shall indemnify all officers and directors, and former officers and directors, to the full extent permitted by law as the law now exists or may be amended hereafter.

IN WITNESS WHEREOF, the undersigned Incorporator has executed these Articles of Incorporation this  $\frac{1214}{1200}$  day of March, 1997.

JAYR. BESKIN, Incorporator

STATE OF FLORIDA

)ss:

**COUNTY OF Dade** 

The foregoing instrument was acknowledged before me this /2 day of March 1997, by JAY R. BESKIN, ESQ., who is personally known to me.

Signature of person taking acknowledgmen

Print name:

Title or rank:

Commission No.:

OFFICIAL NOTARY SEAL MARILYN KALIK NOTARY PUBLIC STATE OF FLORIDA

COMMISSION NO. CC407489

MY COMMISSION EXP. OCT. 26,1998

## ACCEPTANCE BY REGISTERED AGENT

The undersigned, DADE COUNTY CORPORATE AGENTS, INC., whose address is 20801 BISCAYNE BOULEVARD, SUITE #505, AVENTURA, FLORIDA 33180, hereby accepts the appointment as Registered Agent of SUPPORTLIFE RESPIRATORY SYSTEMS, INC., which is contained in the foregoing Articles of Incorporation.

DATED THIS 12 day of March, 1997.

Dad County Corporate Agents, Inc. By:

is Vice hese

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