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TO: DIVISION OF CORPORATIONS

FAX #: (850) 922-4001

FROM: EMPIRE CORPORATE KIT COMPANY

ACCT#: 072450003255

CONTACT: RAY STORMONT PHONE: (305)541-3694

FAX #: (305)541~3770

NAME: ABM MEDICAL EQUIPMENT CORP.

AUDIT NUMBER...... H97000011106

DOC TYPE..... FLORIDA PROFIT CORPORATION OR P.A.

PAGES..... 5

CERT. OF STATUS..0 CERT. COPIES....1

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ARTICLES OF INCORPORATION OF ABM MEDICAL EQUIPMENT CORP. a Florida corporation

ARTICLE I. CORPORATE NAME.

The name of this corporation is: ABM MEDICAL EQUIPMENT CORP. Corporate Address: 6801 N.W. 77th Avenue, Suite 104, Miami, FL. 33166

ARTICLE II. NATURE OF BUSINESS.

The specific nature of the business of this corporation shall be the general sale of medical equipment as permitted under the laws of the United States of America and the laws of the State of Florida.

ARTICLE III. DURATION.

This corporation shall have perpetual existence unless sconer dissolved in accordance with the laws of the State of Florida. The date on which corporate existence shall begin is:

JULY 7, 1997

ARTICLE IV. CAPITAL STOCK.

This corporation is authorized to issue shares of stock as follows:

- A. <u>Designation</u>: The stock of this corporation shall be known as Common Stock.
- B. <u>Authorized:</u> The maximum number of shares of Common Stock that this corporation may issue is: 300.
- C. Par Value: Each share of Common Stock shall have NO par value.
- D. <u>Consideration</u>: Shares of Common Stock may be issued in exchange for cash, real property, labor or services rendered, or any other combination of the foregoing. In the absence of fraud in the transaction, the judgment of the Board of Directors as to the value of any such consideration shall be conclusive.

THIS INSTRUMENT PREPARED BY: Ana Maria Camacho, Esquire Florida Bar No.: 0033677 9192 Coral Way, Suite 201 Miami, FL. 33165 Telephone: (305) 227-0727

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- E. Non-assessability: Each share of Common Stock shall be issued in exchange for consideration which is at least equal to the par value thereof, and shall be fully paid and non-assessable.
- F. <u>Voting Rights:</u> Each share of Common Stock shall entitle the record holder thereof, to one vote upon each proposal presented at meetings of the stockholders of the corporation.
- G. <u>Dividends:</u> Record holders of Common Stock are entitled to receive their pro-rata share of any dividends that may be declared by the Board of Directors out of assets legally available for such purpose.
- H. Liquidation Rights: Holders of Common Stock are entitled, in the event of liquidation or dissolution of this corporation, to receive their pro-rata share of any assets of this corporation remaining after payment of all corporate debts and obligations.

ARTICLE V. INITIAL REGISTERED AGENT AND OFFICE.

The street address of the Initial Registered Office of this corporation is: 6801 N.W. 77th Avenue, Suite #104, Miami, FL. 33166 and the name of the Initial Registered Agent of this corporation at that address is ALBERTO ARROYAVE.

ARTICLE VI. DIRECTORS.

This corporation shall have initially Three (3) Director(s). The number of Directors may either increase or decrease, from time to time by the bylaws but shall never be less than one. The name and address of the Initial Directors of this corporation are:

ALBERTO ARROYAVE, as Director

Address: 6801 N.W. 77th Avenue, Suite 104, Miami, Florida 33166

RODRIGO QUINTERO, as Director

Address: 6801 N.W. 77th Avenue, Suite 104, Miami, Florida 33166

ROSELISSE A. BUSTAMANTE, as Director

Address: 6801 N.W. 77th Avenue, Suite 104, Miami, Florida 33166

And the officer(s) of this corporation shall be:

ALBERTO ARROYAVE, as President

Address: 6801 N.W. 77th Avenue, Suite 104, Miami, Florida 33166

RODRIGO QUINTERO, as Vice-President

Address: 6801 N.W. 77th Avenue, Suite 104, Miami, Florida 33166

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ROSELISSE A. BUSTAMANTE, as Secretary & Treasurer Address: 6801 N.W. 77th Avenue, Suite 104, Miami, Florida 33166

ARTICLE VII. INITIAL SUBSCRIBER.

The name and address of the Initial Subscriber of these Articles of Incorporation is: Alberto Arroyave, located at 6801 N.W. 77th Avenue, Suite 401, Miami, Florida 33166.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this <a href="https://dx.ncbi.nlm.ncb

Alberto Arroyave, as Subscriber

STATE OF FLORIDA

SS:

COUNTY OF DADE

I hereby Certify that on this day, before me, an officer duly authorized to administer oaths and take acknowledgments, personally appeared Alberto Arroyave known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that (s) he executed the same, that I relied upon the following form of identification of the above-named person: D.L.#AciO-CM-SL-169-0 and that an oath (was) (was not) taken.

Witness my hand and seal in the County and State last aforesaid this <a href="https://dx.doi.org/10.1501/j.j.j.doi.org/10.1501/j.j.doi.org/10.1501

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OF FLOR BEPT 27,1998

Notary Signature

Printed Notary Signature

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 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.

First - That ABM MEDICAL EQUIPMENT desiring to organize under the laws of the State of Florida with its principal office, as indicated in these Articles of Incorporation has named Alberto Arroyave located at 6901 N.W. 77th Avenue, Suite 401, City of Miami, County of Dade, State of Florida, as its agent to accept service of process within this state.

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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 STATUES 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.

STATE OF FLORIDA)

SS:

COUNTY OF DADE

Witness my hand and seal in the County and State last aforesaid this 7th day of July, 1997.

Notary Signature

Printed Notary Signature

OFFICIAL NOTARY SEAL
AMA IN CAMACHOGONZALEX
COMMISSION NUMBER
CG410088
MY COMMISSION SUP.
SEPT 27,1998

FILED

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COALIANT OF STATE

ALLAHASSEE, FLORIDA

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