PACTAL EXETER 22778

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

Tallahassee, FL 32314				
SUBJECT:	Horizon (Proposed corpo	rate name - must include su	cal Sales	s, Inc.,
Enclosed is an original	and one(1) copy of the article		00002450 -03/09/98- ****122.50 check for :	₩***122.50
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy ADDITIONAL CO	\$131.25 Filing Fee, Certified Copy & Certificate PY REQUIRED	
	Kimberly P Name (Pr 3541 Parkwa Land O'Lak City, (813) Daytime To	Blvd.	EFFECTIVE DA 04-15-98	98 MAR -9 AM IO: 09 SECNETARY OF STATE TALLAHASSEE, FLORIDA

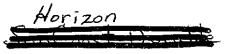
NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

EFFECTIVE DATE

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

The name of the corporation shall be:



e Medical Sales, Inc.,

<u>ARTICLE II PRINCIPAL OFFICE</u>

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

3541 Parkway Blvd., Lando'Lakes, FL 34639

ARTICLE III SHARES

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

One Hundred (100) Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Shirley Perez 18002 Crawley Rd. Odessa, FL 33556

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Kimberly P. Moore 3541 Parkway Blud. Lando Lakes, FL 34639

Article II The effective date of this corporation Shall be April 15, 1998.

Linkely P. Mone

(An additional article must be added if an effective date is requested.)

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