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CONTACT: RICHARD OSTER

PHONE: (608)251-6600

FAX #: (608)251-6907

NAME: INFUSION SYSTEMS INC.

AUDIT NUMBER.....H98000007548

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

CERT. OF STATUS..1 PAGES..... 1

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**ARTICLES OF INCORPORATION  
OF  
Infusion Systems Inc.**

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

**ARTICLE I NAME**

The name of the corporation shall be: Infusion Systems Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be: 930 NE 96<sup>th</sup> Street, Miami, FL 33138

**ARTICLE III SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 2000. The par value of each share of stock is \$.01.

**ARTICLE IV INITIAL REGISTERED AGENT & STREET ADDRESS**

The name and address of the initial registered agent is: Business Filings Incorporated., 1186 Ocean Shore Blvd., Suite 195, Ormond Beach, FL 32176.

**ARTICLE V INCORPORATOR**

The name and street address of the incorporator to these Articles of Incorporation is Richard Oster, 214 N. Henry Street, Suite 201, Madison, WI 53703.

**ARTICLE V INITIAL DIRECTORS**

The initial directors of the corporation is:  
Duard Hardy, 903 NE 96<sup>th</sup> Street, Miami, FL 33138  
Leo Martel, 903 NE 96<sup>th</sup> Street, Miami, FL 33138  
Lilian Hardy, 903 NE 96<sup>th</sup> Street, Miami, FL 33138

The undersigned incorporator has executed these Articles of Incorporation this 17<sup>th</sup> day of April, 1998

The document was prepared by:  
Richard Oster, 214 N. Henry Street, Suite 201, Madison, WI 53703. 608-251-6600



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CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

The name of the corporation is: Infusion Systems Inc.

The name and address of the registered agent and office is: Business Filings Incorporated,  
1186 Ocean Shore Blvd., Suite 195, Ormond Beach, FL 32176.

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: \_\_\_\_\_



Richard Oster, Vice-President  
Business Filings Incorporated.

Date 4-20-98

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