TRANSMITTAL LETTER

P. O. Box 6327 Tallahassee, FL 32314	,			
SUBJECT: E.	K. Universal / (Proposed corpo	TEN ICAL NO prate name - must include suf	<u>r</u>	
		8	00002564 -06/18/980 ******70.00	01055004
Enclosed is an original a	nd one(1) copy of the article	es of incorporation and a c	heck for :	÷
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
ADDITIONAL COPY REQU				
	Eugene Kli Name (F	·		
_	17031 BOCA C	Pub MVD - UN Address	IT 81A	
<u></u>	BOCA RATON City;	State & Lip	<u>7</u>	SECRETA DIVISION OF

Daytime Telephone number

ARTICLES OF INCORPORATION

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:

E.K. Universal Medical luc.

PRINCIPAL OFFICE

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

17031 BOCA CLUB BluB - ALT 81 A BOCA RATON FT 33487

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

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

ARTICLE V INCORPORATOR BOLG Rafon, F1, 33487
The name and address of the incorporator to these Articles of Incorporation are:

EUDENE KLIPMAN 17031 BOCA CLUB BLUD - ART 81A BOCA RATON FT 33487

(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