ZARUS CORPORATE FILING SERVICE, (Requestor's Name) 3320 S.W. 87th AVENUE (Address) MIAMI, FLORIDA (305)552-5973 (City, State, Zip) LOCAL REPRESENTATIVE TALLAHASSEE OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time 2.00 Walk in Certified Copy Certificate of Status Mail out Will wait Photocopy AMENDMENTS NEW FILINGS Amendment **Profit** Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FILNGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other CR2E031(9/92)

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: R AND D MEDICAL COR



2.2

ARTICLE II PRINCIPAL OFFICE

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

2346 NW 7th St SUITE: B MIAMI, FL 33125

ARTICLE III SHARES

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

100 SHARES!

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ROBERT DAVID M.D. 1000 WEST AVE. #1420 MIAMI BEACH FC 33139

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

I am the only SHARE HOLDER

ROBERT DAVID M.D.

1000 WEST AVE

** 1420

MIAMIRERY FL 33139.

ARTICLE VI DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):

ROBERT DAVID M.D. 1000 WEST AVE. # 1420. MAIAMI BEACH, FL 33139.

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 24% day of AUG, $19\nearrow P$.

Signature
Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 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.

1. 2.	The name of the corporation is: R AND D MEDICAL CORPORATION	
	The name and address of the registered agent and office is: ROBERT DAVID M.O. (DOD WEST AVE. # 1920 · MIRMI BEACH, FL 33/39.	
	(NAME)	
	(P.O. BOX <u>NOT</u> ACCEPTABLE)	
	MIAMI, FL 33125	
	(CITY/STATE/ZIP)	

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

DATE

AUG 24th 198. FILL 198. 32

REGISTERED AGENT FILING FEE: \$35.00