P99000023937

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

000002801130--2 -03/10/99--01080--014 *****87.50 *****87.50

SUBJECT: BEL Medical Supply Incorporated
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

\$70.00

□ \$78.75

Filing Fee

Filing Fee

& Certificate of Status

\$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: Bernardo Montoto Jr

Name (Printed or typed)

H208 Grainary Avenue

Address

Tampa, FL 33624

City, State & Zip

B13-962-7798

Daytime Telephone number

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

E. BROCK MAR 1 6 19991

ARTICLES OF INCORPORATION

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

ARTICLE I:

The name of the corporation shall be:

B&L Medical Supply Incorporated

ARTICLE II:

The principal place of business and mailing address of this corporation shalf b

4208 GRAINARY AVENUE, TAMPA, FLORIDA 33624

ARTICLE III:

The corporation is authorized to issue one class of stock, that stock being 1,000 shares of

no par value, common stock, with identical rights and privileges, the transfer of which is

restricted according to the bylaws of the corporation.

ARTICLE IV:

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

BERNARDO MONTOTO JR 4208 GRAINARY AVENUE TAMPA, FLORIDA 33624

ARTICLE V:

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

BERNARDO MONTOTO JR 4208 GRAINARY AVENUE TAMPA, FLORIDA 33624

ARTICLE VI:

The corporation's period of duration is perpetual.

Signature/Incorporator

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/Registered Agent