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ounrise Medical Systems, Inc	7000028489873 -04/23/9901018014 *****78.75 ******78.75
AECEIVED 99 APR 23 AM 9: 48 DIVISION OF CORPORATIONS TALLAMASSEE. FLORIDA	Art of Inc. File LTD Partnership File Foreign Corp. File L.C. File Fictitious Name File Fictitious Name File Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Search
Signature	Fictitious Owner Search Vehicle Search Driving Record
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Walk-In Will Pick Up	Courier

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ARTICLES OF INCORPORATION VISION OF CORPORATIONS.

99 APR 23 PM 2: 04

OF

Sunrise Medical 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 is Sunrise Medical Systems, Inc.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 1503 Bayshore Blvd., Indian Rocks Beach, FL 33785.

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one thousand (1,000) shares having a par value of (\$1.00) per share.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is G. J. Zaski, 1503 Bayshore Boulevard, Indian Rocks Beach, FL 33785.

ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of each member of the initial Board of Directors of the corporation is G. J. Zaski, 1503 Bay Shore Boulevard, Indian Rocks Beach, FL 33785.

The undersigned has executed these Articles of Incorporation this 23rd day of April 1999.

"Capital Connection, Inc. by Chris Grunewald, Client Representative"

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned 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.	The	name	of t	he corp	oration	is: <u>Sunrise</u>	Medical	Systems,	Inc.
								•	
2.	The	name	e and	street	address	of the re	gistered	agent and	1 office
				I <u>, 1503</u>		Boulevar			
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HAVE 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.