USE ONL ARUS CORPORATE FILING SERVICE, INC. (Requestor's Name) 3320 S.W. 87th AVENUE 200002940902--4 -07/26/99--01062--004 (Address) MIAMI, FLORIDA (305)552-5973 *****78.75 *****78.75 (City, State, Zip) (Phone #) LOCAL REPRESENTATIVE TALLAHASSEE OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time 1,00 Walk in Certified Copy Mail out Will wait Photocopy Certificate of Status NEW FILINGS AMENDMENTS **Profit** Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other

Examiner's Initials

ARTICLES OF INCORPORATION

99 JUL 26 PH 1: 39 SECRETARY OF STATE

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

ARTICLE I NAME

The name of the corporation shall be:

Medical Support Equipment, Inc.

ARTICLE II PRICIPAL OFFICE

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

Maria E. Mendez 1001 S.W. 13 Avenue Miami, Florida 33135

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 SRTEET ADDRESS

The name and address of the initial registered agent is:

Maria E. Mendez 1001 S.W. 13 Avenue Miami, Florida 33135

ARTICLE V INCORPORATOR(S)

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

Maria E. Mendez 1001 S.W. 13 Avenue Miami, Florida 33135

ARTICLE VI DIRECTOR(S)

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

Maria E. Mendez 1001 S.W. 13 Avenue Miami, Florida 33135

The undersigned incorporate Incorporation this _22	or(s) has(have) executed these Articles o day ofuly, 19 <u>99</u> .
	Signature
	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.

The nam	e of the corporation is: Medical Support Equipment, I
The nam	e and address of the registered agent and office is:
	Maria E. Mendez
	(NAME)
	1001 S.W. 13 Avenue
	(P.O. BOX <u>NOT</u> ACCEPTABLE)
	Miami, Florida 33135
	(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 July 22, 1999 DATE

REGISTERED AGENT FILING FEE: \$35.00