

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number

: (850)922-4001

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone

: (305)541-3694

Fax Number

: (305)541-3770

FLORIDA PROFIT CORPORATION OR P.A.

RAY MEDICAL EQUIPMENT AND SUPPLIES, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

<u>Of</u>

RAY MEDICAL EQUIPMENT AND SUPPLIES, INC.

The undersigned hereby petition for the formation of a corporation under the laws of the State of Florida, with and under the following Charter:

ARTICLE I

The name of the corporation shall be:

RAY MEDICAL EQUIPTMENT AND SUPPLIES, INC.

ARTICLE II

The general nature of the business to be transacted shall be safes rentals of medical supplies and or otherwise engage in any activity or business permitted under the laws of the United States of America and this State.

ARTICLE III

The capital stock of this corporation shall consist of 1000 shares of common stock of \$1.00 par value each, all or part of said stock to be issued from time to time as may be determined by the Board of Directors. On dissolution or liquidation of the corporation the holders of the stock shall be entitled to distribution rateable as their holdings may appear upon the stock record of the corporation.

ARTICLE IV

This corporation shall have perpetual existence.

ARTICLE V

The business and property of this corporation shall be managed by a Board of Directors consisting of one (1) or more members, as may be provided Bylaws.

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GERALD T. ENGEL, ESQ. 901 N. W. 22ND AVENUE MIAMI, FL (305) 649-7344

FL. BAR NO.: 694-290

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ARTICLE VI

The names and post office addresses of the first Board of Directors of this corporation, who, subject to the provisions of this Certificate, the By-laws of this corporation, and the laws of the State of Florida, shall hold office for the first year of this corporation's existence or until their successors are elected and have qualified, are as follows:

MARIAN ORTEGA

Prasident

Residing at:

9280 FOUNTAINE BLEAU BLVD., APT. 402

MIAMI, FL 33172

ARTICLE VII

The Registered Agent for the purpose of complying with Florida law shall be MARIAM ORTEGA and the registered agent's office of this corporation shall be 7370 NW 36TH STREET, STE. 105-D, MIAMI, FL 33166

ARTICLE VIII

The post office address of the principal office of this corporation until otherwise determined by the stockholders or the Board of Directors shall be 7370 NW 36TH STREET, STE. 105-D, MIAMI, FL 33166 and branch offices may be maintained at such places in the State of Florida, and in the United States of America and in foreign countries as may from time to time be authorized by the stockholders or Board of directors of this Corporation.

ARTICLE IX

The name and post office address of the Subscriber of this Certificate of Incorporation and the number of shares of the capital stock of this corporation subscribed by the said Subscriber of this Certificate of Incorporation are as follows:

NAME

ADDRESS

NO. OF SHARES

MARIAM ORTEGA

9280 FOUNTAINE BLEAU BLVD., #402 MIAMI, FL 33172

1000

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ARTICLE X

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The regulations of the conduct of the affairs of this corporation, the issuance of certificate of capital stock of this corporation, the voting rights of the holders of the shares of the capital stock of this corporation, are vested in the shareholders.

IN WITNESS WHEREOF, the undersigned Subscriber has hereunto set their hand and seal in the City of Miami, County of Dade, State of Florida, this 5Th day of October, 1999.

SWORN TO AND SUBSCRIBED before me on this 5Th day of October, 1999.

STATE OF FLORIDA)
SS
COUNTY OF DADE

I HEREBY CERTIFY that on this day personally appeared before me, the undersigned authority, MARIAM ORTEGA, known to be the person who executed the foregoing Certificate of Incorporation of RAY MEDICAL EQUIPTMENT AND SUPPLIES, INC. and she acknowledged before me that she has executed the same for the purpose therein set forth. The foregoing instrument was acknowledged before me by MARIAM ORTEGA, who preduced identification.

SWORN TO AND SUBSCRIBED before on this 5Th day of October, 1999.

MY COMMISSION EXPIRES:

NOTARY PUBLIC STATE OF Florida
COMMISSION NO. CC607750
MY COMMISSION EXP. DEC. 15.2000

I ACCEPT DESIGNATION AS REGISTERED AGENT OF THIS CORPORATION AND I AM FAMILIAR WITH THE DUTIES REQUIRED OF THE

MARIAM ORTEGA

Prepared by:

GERALD T. ENGEL, ESQ. 901 N. W. 22MD AVENUE MIAMI, FL 33125 (305) 649-7344

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