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TRANSMITTAL LETTER

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

000003016780--3
-10/18/99-01078-011
*****78.75 *****78.75

SUBJECT: HOUSE DOCTORS SUPPLY, INC.

Enclosed is an original and one copy of the articles of incorporation and a check in the amount of \$78.75 (\$70.00 filing fee and \$8.75 for certificate of status). for filing fees.

FROM: BARBARA L. SKEANS
11 COLONIAL CLUB DRIVE # 101
BOYNTON BEACH, FLORIDA 33435

PHONE: (561) 734-4331

FILED
99 OCT 18 PM 1:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10-20
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ARTICLES OF INCORPORATION

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 this corporation shall be: HOUSE DOCTORS SUPPLY, Inc.

ARTICLE II- PRINCIPAL OFFICE

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

11 COLONIAL CLUB DRIVE # 101
BOYNTON BEACH FLORIDA 33435

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TALLAHASSEE, FLORIDA

ARTICLE III-SHARES

The number of shares that this corporation is authorized to have outstanding at one time is: One thousand (1,000) at \$1.00 par value.

ARTICLE IV-INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

BARBARA L. SKEANS
11 COLONIAL CLUB DRIVE # 101
BOYNTON BEACH, FLORIDA 33435

ARTICLE V-INCORPORATOR

The name and address of the incorporator to these articles of incorporation is:

BARBARA L. SKEANS
11 COLONIAL CLUB DRIVE #101
BOYNTON BEACH FLORIDA 33435

The undersigned incorporator has executed these articles of incorporation this

15 day of October, 1999

Barbara L. Skeans
BARBARA L. SKEANS

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of the corporation is: HOUSE DOCTORS SUPPLY, INC.

2. The name and address of the registered agent and office is:

BARBARA L. SKEANS
11 COLONIAL CLUB DRIVE # 101
BOYNTON BEACH, FLORIDA 33435

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.


BARBARA L. SKEANS

Date: October 15, 1999