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Florida Department of State  
Division of Corporations  
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**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**JIREN IS MY PROVIDER INC**

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

ATTN:  
Becky

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ARTICLES OF INCORPORATION  
FOR

The undersigned, acting as incorporator(s) of a corporation pursuant to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

ARTICLE I NAME:

The name of the corporation shall be:

JIREN IS MY PROVIDER INC

ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The principal and mailing address of this corporation is:

7832 NW 113 Place  
Doral FL 33178

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ARTICLE III PURPOSE (S)

The specific purpose(s) for which the corporation is organized is (are):

Help and provide medical supplies  
to those that arent able to afford  
them. And also to give psychological  
help.

ARTICLE IV MANNER OF ELECTIONS OF DIRECTORS:

The manner in which the directors are elected or appointed is as follows:

By the bylaws.

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**ARTICLE V LIMITATION OF CORPORATE POWERS**

The corporate powers of this corporation are as provided the section 617.0302, Florida Statutes, unless limited as follows:

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

Marlene J. Sanchez.  
7832 NW 113 Place Doral FL 33178

**ARTICLE VII DIRECTORS (must have the minimum of three directors): NAME AND ADDRESS**

Marlene J. Sanchez (President)  
Sally P. Pasero. S. (S)

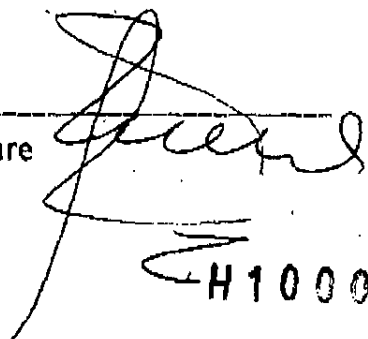
**ARTICLE VIII INCORPORATOR**

The name and street address of the incorporator for these Article of Incorporator is:

Marlene J. Sanchez  
7832 NW 113 Place Doral FL 33178

The undersigned incorporator has executed these Articles of Incorporation this 8 day of December, 2010

Signature



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CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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 name of the corporation is:

JIREN IS MY PROVIDER INC  
(must include suffix)

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

Marlene J. Sanchez

(name)

7832 NW 113 Place

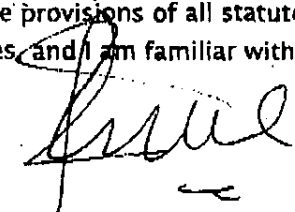
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Doral FL 33178

(City/State/Zip)

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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 of Registered AgentDecember 8, 2010

Date

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