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Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
THE MOTHER AND CHILD HEALTH AND EDUCATION CORP.**

Certificate of Status	0
Certified Copy	1
Page Count	03
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9/22/07

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DIVISION OF CORPORATIONS

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ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)**ARTICLE I NAME**The name of the corporation shall be: THE MOTHER AND CHILD HEALTH AND EDUCATION CORP.**ARTICLE II PRINCIPAL OFFICE**Principal street address:
7104 NW 50TH STREET

Mailing address, if different is: _____

MIAMI, FL 33166SEP 19 AM 11:02
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DIVISION OF CORPORATIONS**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: THE CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, EDUCATIONAL, AND SCIENTIFIC PURPOSES UNDER SECTION 501(c)(3) OF THE INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE.**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: AS STATED IN THE BY-LAWS OF THE CORPORATION.**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: NAND WADHWANI - PSTD

Name and Title: _____

Address: TST PO BOX 95020
KOWLOON, HONG KONG

Address: _____

Name and Title: MARGARITA GONZALEZ - D

Name and Title: _____

Address: 7104 NW 50TH STREET
MIAMI, FL 33166

Address: _____

Name and Title: ROLANDO GONZALEZ - D

Name and Title: _____

Address: 7104 NW 50TH STREET
MIAMI, FL 33166

Address: _____

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Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: MARGARITA GONZALEZ

Address: 7104 NW 50TH STREET

MIAMI, FL 33166

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARGARITA GONZALEZ

Address: 7104 NW 50TH STREET

MIAMI, FL 33166

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Margarita Gonzalez
Required Signature of Registered Agent

9/18/14
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Margarita Gonzalez
Required Signature of Incorporator

9/18/14
Date

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