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TRANSMITTAL LETTER

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SEUNETARY OF STATE TALLAHASSEE, FLORIDA

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

400003159504---0 -03/07/00--01005--003_ *****78.75 *****78.75

SUBJECT: R (Pr	mbylette Scott F oposed corporate	ealthcare Services name-must include	,Inc. suffix)		
Enclosed i	s an original ar ion and a check	nd one(1)copy of the	e articles of		- - -
□ \$70.00 Filing fee	\$78.75 Filing fee &Certificate	☐ \$122.50 Filing fee & Certified Copy	Signature \$131.25 Filing fee, Certified Copy &Certificate		
FROM: Clifton H. Rodriquez, C.P.A. Name(printed or typed)			ياو		
		3146 N.W. 68	Street		- -
		Ft.Lauderdale,Flo	orida 33309	. *	1/17 ≈
		Voice: (954)969	9-9637		

NOTE: Please provide the original and one copy of the articles.

Jrd 13/2000

ARTICLES OF INCORPORATION

For

Rubylette Scott Healthcare Services, Inc.

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SEUNCTARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned subscribers for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:

Article I-Name of the Corporation

The name of the corporation shall be:

Rubylette Scott Healthcare Services, Inc.

Article II-Nature or Purpose of the Business

The purpose of the corporation is to engage in any lawful activity permitted by the laws of this state. The corporation will offer professional healthcare services to its customers in the Tri-County area, the State of Florida, and the world. The corporation will comply with any professional regulations imposed by state agencies within the State of Florida as well.

Article III-Principal Office

The principal business mailing address of this corporation shall be:

19701 N.W. 5th Court Miami, Florida 33169 Voice: (305)770-4369

Article IV-Number of Shares Authorized

The number of common shares of stock that this corporation is authorized to have outstanding at any one time is:

One Thousand (1,000)

(The par value of the corporation common stock will be \$1.00) Rubylette M. Scott will each own 100% of the outstanding shares of the corporation stock (i.e., equity of the corporation.

Article V-Initial Registered Agent

The name and address of the initial registered agent is:

Clifton H. Rodriquez, C.P.A. 3146 NW 68 Street Ft. Lauderdale, Florida 33309 (954) 969-9637

ARTICLES OF INCORPORATION

For

Rubylette Scott Healthcare Services, Inc.

Article VI-Subscriber(s)

Rubylette M. Scott 19701 N.W. 5th Court Miami, Florida 33169

The undersigned subscribers have executed these Articles of Incorporation this

23th day of February, 2000

(Signature)

Article VII-Perpetual Life

The corporation shall have a perpetual existence unless a majority of board of directors, or the shareholders decides to discontinue the existence of the corporation.

ARTICLES OF INCORPORATION

For

Rubylette Scott Healthcare Services, Inc.

Article VIII-Appointment of the Officers and Board of Directors

The Board of Directors shall be appointed in accordance with the Bylaws of the corporation. Each Board member shall be appointed in accordance with the Bylaws of the corporation, and shall carry out their responsibilities in a sincere and trustworthy manner. The following officers have been appointed by the Board of Directors:

Name	<u>Position</u>	
Rubylette M. Scott	President/CEO/Chairperson	
Victor R. Scott	Corporate Secretary/Director	
Clifton H. Rodriquez, CPA	Registered Agent/Board Advisor	-

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENTS IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the corporation is Rubylette Scott Healthcare Services, Inc.
- 2. The name and address of the registered agent and office are as follows:

Clifton H. Rodriquez, C.P.A. 3146 NW 68 Street Ft. Lauderdale, Florida 33309

Having been named as registered agent and to accept service 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 obligation of my position as registered agent.

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SECHILLAHASSEE FLORIDA

(Date)

O2/23/200 CF STATE
(Signature)

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