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

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

MED SOLUTIONS GROUP INC.

Certified Copy 1 Page Count 03 Estimated Charge \$78.	Acceptance Acceptance
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B. McKnigh MAY 2 6 2000

ARTICLES OF INCORPORATION

OF.

MED SOLUTIONS GROUP, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE | NAME

The name of the corporation shall be: MED SOLUTIONS GROUP, INC.

The principal place of business of this corporation shall be: 11117 West Okechobee Rd, #106, Bialeah Gardens F1, 33016.

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 1000 shares @ \$1.00.

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V. OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer (s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

Mercedes Rodriguez (President) 17630 NW 76 Ct, Miami Fl, 33015.

Sonia Cano (Vice-President) 7450 West 15 Ave Hialeah, Fl 33014.

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator (s) to this articles of incorporation is(are):

Mercedes Rodriguez 17630 NW 76 Ct Miami Fl, 33016

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this, 25th day of May 2000

Signature(s) of Incorporator(s)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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.

1. The name of the corporation:	
MED SOLUTIONS GROUP, INC.	
2. The name and address of the office is:	registered agent and
Mercedes Rodriguez 17630 NW 7	76 Ct 8 SY
(P.O. BOX NOT AC	CCEPTABLE)
Miami F1, 33014	4. 25 F
(CITY/STATE	AMIO: 24
	NATURE WWY .
	TLE
HAVING BEEN NAMED TO ACCEPT S ABOVE STATED CORPORATION, AT TH CERTIFICATE, I HEREBY AGREE TO A FURTHER AGREE TO COMPLY WITH THE RELATIVE TO THE PROPER AND CONDUTIES, AND I ACCEPT THE DUTIES A 607.325, FLORIDA STATUTES.	ERVICE OF PROCESS FOR THE HE PLACE DESIGNATED IN THIS CT IN THIS CAPACITY, AND I E PROVISIONS OF ALL STATUTES MPLETE PERFORMANCE OF MY AND OBLIGATIONS OF SECTION HATURE