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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT CORPORATION OR P.A.

MRB THERAPY, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
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Articles of Incorporation
of
MRB THERAPY, INC.

Article I. Name

The name of this Florida corporation is:
MRB THERAPY, INC.

Article II. Address

The mailing address of the Corporation is:

MRB THERAPY, INC.
240 W. 49 ST.
HIALEAH, FL 33012

Article III. Capital Stock

The Corporation shall have the authority to issue 100 shares of
common stock, par value \$1.00 per share.

Article IV. Registered Agent

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

MIGUEL RODRIGUEZ
240 W. 49 ST.
HIALEAH, FL 33012

Article V. Board of Directors

The affairs of the Corporation shall be managed by a Board of
Directors consisting of no less than one director. The number of directors may
be increased or decreased from time to time in accordance with the Bylaws of
the Corporation. The election of directors shall be done in accordance with the
Bylaws. The directors shall be protected from liability to the fullest extent
permitted by law. The name of each initial member of the Corporation's Board of
Directors are:

President - Miguel Rodriguez 240 W. 49 St., Hialeah, FL 33012

Prepared by:
Barreras & Rachlin, P. A., 11120 N. Kendall Cr., #201, Miami, FL 33176
(305)270-2040

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Article VI

The corporation shall have perpetual existence and may engage in any and all business permitted under the laws of the State of Florida and the United States.

Article VII. Incorporator

The name and address of the incorporator is:

MIGUEL RODRIGUEZ
240 W. 49 ST.
HIALEAH, FL 33012

Article VIII. Corporate Existence

The corporate existence of the Corporation shall be effective upon filing.

The authorized representative of the incorporator executed the Articles of Incorporation on October 4, 2000.

By: X


MIGUEL RODRIGUEZ

President

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

**CORPORATION:
MRB THERAPY, INC.**

**REGISTERED AGENT:
MIGUEL RODRIGUEZ
240 W. 49 ST.
HIALEAH, FL 33012**

I agree to act as registered agent to accept service of process for the corporation named above at the place designated in this Certificate. I agree to comply with the provisions of all statutes relating to the proper and complete performance of the registered agent duties. I am familiar with and accept the obligations of the registered agent position.

By: 
MIGUEL RODRIGUEZ
Registered Agent

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