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To:
Division of Corporations
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From:
Account Name : ACE INDUSTRIES, INC.
Account Number : 070744001530
Phone : (305) 358-2571
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FLORIDA PROFIT CORPORATION OR P.A.

HEALTH CARE AND MARKETING SERVICES INC.

Certificate of Status	0
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Articles of Incorporation

Article 1: Name of Corporation: **HEALTH CARE CONSULTING AND MARKETING SERVICES INC.**

Address of Corporation: **P.O. BOX 144933
CORAL GABLES, FLORIDA 33141**

Article 2: Capital Stock: The number of shares which the corporation has authorized to be outstanding at any one time is **100**, with a par value of **OMIT**.

Article 3: **REGISTERED AGENT: ANA MARGARITA ALVAREZ**

**REGISTERED OFFICE: 620 SOUTHWEST 58 COURT
MIAMI, FLORIDA 33144**

*I am familiar with and hereby accept the duties and responsibilities as Registered Agent for said corporation.


Signature of Registered Agent

Article 4: The Board of Directors are: (Board of Directors is NOT REQUIRED).
First listed is President, Second is Vice President, then Secretary/Treasurer.

1. **ANA MARGARITA ALVAREZ, 620 SOUTHWEST 58 COURT, MIAMI, FLORIDA 33141**
2. **ERICK A. ALVAREZ, 620 SOUTHWEST 58 COURT, MIAMI, FLORIDA 33141**
- 3.

Article 5: The NAME and ADDRESS of the INCORPORATOR is:

**ANA MARGARITA ALVAREZ
620 SOUTHWEST 58 COURT
MIAMI, FLORIDA 33141**

In witness whereof, I have subscribed my name:


Signature of Incorporator

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