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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : HUBCO
Account Number : 104662003400
Phone : (516) 935-3940
Fax Number : (516) 935-3088

FLORIDA PROFIT CORPORATION OR P.A.

Healing Health Care, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03 (4)
Estimated Charge	\$78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 JUN -7 PM 3:00

FILED

B. McKnight JUN 07 2001

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Healing Health Care, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

Healing Health Care, Inc.

721 U.S. Highway 1 - Suite 212

North Palm Beach, FL 33408

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TALLAHASSEE, FLORIDA

ARTICLE III SHARES

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

8000 Shares at \$1.00 Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Tania Esbaile

721 U.S. Highway 1 - Suite 212

North Palm Beach, FL 33408

Prepared By:

Bruce B. Hubbard

77 East John St.

Hicksville, New York 11801

1-516-935-3940

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ARTICLES V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

**Tania Esballe
721 U.S. Highway 1 - Suite 212
North Palm Beach, FL 33408**

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

6th day of June 2001.

A handwritten signature in black ink, appearing to read 'Tania Esballe', written over a horizontal line.

Tania Esballe - Signature

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

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

1. The name of the corporation is: **Healing Health Care, Inc.**

2. The name and address of the registered agent and office is:

Tania Esballe

Name

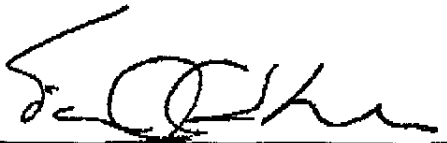
721 U.S. Highway 1 - Suite 212

(P.O. Box or Mail Drop Box NOT Acceptable)

North Palm Beach, FL 33408

(City / State / Zip)

Having been named as registered agent and to accept service of process 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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.



Tania Esballe
SIGNATURE

6/6/01

(Date)

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