3320 S.W. 87 AVENUE MIAMI, FLORIDA (305)552-5973 TERESA ROMAN (TALLAHASSEE REPRESENTATIVE) OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time 2.00 Walk in Certified Copy Mail out Will wait Photocopy Certificate of Status NEW FILINGS AMENDMENTS Amendment Profit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Ħoreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other Examiner's Initials

ARTICLES OF INCORPORATION

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

ARTICLE I - NAME

The name of the corporation shall be:

OMEGA HEALTH CARE AND CONSULTING

ARTICLE II - PRINCIPAL OFFICE

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

800 BRICKEL AVE STE# 300 MIANI, FL. 33/31

ARTICLE III -SHARES

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

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

FERNANDO GOMET 800 BRICKELL AVE STE 4-300 MIAMI, FL 33/31

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

FERNANDO GOMEZ-800 BRICKEL AVE STE #300

The undersigned incorporator has executed these Articles of Incorporation this _____ day of ______ 20

Formulae Signature

ARTICLE VI- DIRECTOR(S)

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

FERNANDO GOMER 800 BRICKER AVE STE # 300

MIAMI, Fr. 33/31

CERTIFICATE OF DESIGNATION OF REGISTERED ACENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature

01 DEC 18 PM 12: 32
SECRETARY OF STATE
TALLAHASSEE FLORIDA