POZ00000 1457

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

700004748867--4 -01/03/02--01040--002 *****70.00 ******70.00

SUBJECT: Health care Construction Specialists, Inc.

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00

\$78.75

Filing Fee

Filing Fee

& Certificate of Status

□ \$78.75

□ \$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy & Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: William D- Gamble
Name (Printed or typed)

308 Marshside Drive, North

St- Augustine, FL 32084

(301) - 775 - 6420 Daytime Telephone num SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

Article I - Name:

The name of the corporation shall be Healthcare Construction

Specialists, Inc.

Article II - Principal Office:

The principal place of business/mailing address is:

308 Marshside Drive, North, St. Augustine, FL 32084

Article III - Purpose:

The purpose for which the corporation is organized is to provide

construction consulting services.

Article IV - Shares:

The number of shares of stock is:

One thousand (1,000) Common Shares Without Par Value

Article V - Initial Officers:

The names, addresses and titles are:

President

William D. Gamble 308 Marshside Drive

St. Augustine, FL 32084

Secretary

Suzanne H. Gamble

308 Marshside Drive St. Augustine, FL 32084

Article VI - Registered Agent: The name and Florida street address of the registered agent is:

William D. Gamble 308 Marshside Drive St. Augustine, FL 32084

Article VII - incorporator:

The name and address of the Incorporator is:

Christopher Hass

2911-E Olney Sandy Spring Road

Olney, MD 20832

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Willes N Heavy

Signature/Registered Agent

Data

Signature/Incorporate

)ate