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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 : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335
Phone: (305)599-0839

Fax Number : (305)716-0346

SECRETARY OF STATE ANIL: 43

FLORIDA PROFIT CORPORATION OR P.A.

IDEAL H.R.S. MEDICINE PROGRAM CORP.

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

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ARTICLES OF INCORPORATION OF

IDEAL H.R.S. MEDICINE PROGRAM CORP:

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

ARTICLE ! NAME

The name of the corporation shall be:
"IDEAL H.R.S. MEDICINE PROGRAM CORP.

The principal place of business of this corporation shall be: 900 WEST 49 STREET # 538 HIALEAH FL 33012

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 1,000 SHARES \$ 1.00 PER VALUE

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V. OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer (s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

ISIS GARCIA MARTINEZ 125 WEST 51 STREET HIALEAH PL 33012

President

ALEX MARTINEZ Sec/ Trea 125 WEST 51 Street HIALEAH FL 33012

SECRETARY OF STATE DIVISION OF CORPORATION

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ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator (s) to this articles of incorporation is(are):

ISIS GARCIA MARTINEZ 125 WEST 51 STREET HIALEAH FL 33012 ALEX MARTINEZ 125 WEST 51 STREET HIALEAH FL 33012

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of incorporation this, 12 day of MARCH 2002

Signature(s) Phoorporator(s)

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CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered ogent, in the State of Florida.

The name	of the	corporation:
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IDEAL H.H.R MEDICINE PROGRAM CORF

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

1SIS GARCIA MARTINEZ 900 West 49 Street, #538

(P.O. BOX NOT ACCEPTABLE)

Bialeah, F1 33012.

(CITY/STATE/ZIP)

SIGNATURE

PRESIDENT

TITLE

PRESIDENT

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION

DATE.

607.325. FLORIDA STATUTES.

SIGNATURE

DATE MARCH

MARCH 12/ 2002