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): 1. UNICARE MEDICAL COR (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time Certified Copy Mail out Will wait Photocopy Certificate of Status AMENDMENTS NEW FILINGS Amendment Profit NonProfit Resignation of R.A., Officer/Director Change of Registered Agent **Limited Liability** Dissolution/Withdrawal Domestication Merger Other REGISTRATIONA OTHER FUNGS QUALIFICATION Annual Report Foreign. Fictitious Name Limite# 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 adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

Unicare Medical Corp.



ARTICLE II - PRINCIPAL OFFICE

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

4685 NW 957 E201 Miami Fl. 33126

ARTICLE III -SHARES

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

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Mancy Bosquet 4685 NW 967 8201 Hiami Fl 33126.

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of
Incorporation is:
nancy Bosquet
Mancy Bosquet 4685 NW 957 E201 Miami Fl 33126
Miami +1 33126
The undersigned incorporator has executed these Articles of Incorporation this 25 day of 2002
V Signature
,

ARTICLE VI- DIRECTOR(S)

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

Mancy Bosquet President. 4685 NW 95t Ezol Miami Fl 33126.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /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