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To:

Division of Corporations

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Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346 OF OCT -1 AM 7: 38

## FLORIDA PROFIT CORPORATION OR P.A.

RELIABLE MEDICAL CONSULTANTS INC.

Certificate of Status	0
Certified Copy	1
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## ARTICLES OF INCORPORATION

RELIABLE MEDICAL CONSULTANTS INC.

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 I NAME

The name of the corporation shall be:

RELIABLE MEDICAL CONSULTANTS INC.

The principal place of business of this corporation shall 1435 W. 49 PLACE SUITE # 502 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: 100 SHARES @ 1.00 PAR 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):

(V-PRES) PEDRO L. CARRILLO 1435 W. 49 PLACE SUITE # 502 HIALBAH, FL 33012

(TREA, SEC) YMIRSE MIRANDA 1435 W. 49 PLACE SUITE # 502 HIALEAH, FL 33012

(PRES) ZOILA I. CARRILLO 1435 W. 49 PLACE SUITE # 502 HIALEAH, FL 33012

## ARTICLE VI INCORPORATOR(S)

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

ZOILA I. CARRILLO 1435 W. 49 PLACE SUITE # 502 HIALEAH, FL 33012

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this, LST day of OCTOBER 2002

Signature(s) of Incorporator(s)

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 agent, in the State of Florida.

1. The name of the corporation:
RELIABLE MEDICAL CONSULTANTS INC.
2. The name and address of the registered agent and office is:
ZOILA I. CARRILLO 1435 W. 49 PLACE SUITE # 502
(P.O. BOX NOT ACCEPTABLE)
HIALEAH, FL 33012
(CITY/STATE/ZIP)
က် ရှိ ယူ ဒို
SIGNATURE Turke Miranda.
TITLE Treasurer / Searedary.
DATEOCTOBER 1, 2002
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

SIGNATURE OCTOBER 1, 2002 DATE

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607.325, FLORIDA STATUTES.