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**LAZARUS CORPORATE FILING SERVICE**

**3320 S.W. 87 AVENUE**

**MIAMI, FLORIDA (305)552-5973**

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. HEALTH CARE TRANSPORTATION, INC.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

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☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

## **ARTICLES OF INCORPORATION**

*The undersigned incorporation(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:*

*Health Care Transportation, Inc.*

### **ARTICLES II- PRINCIPAL OFFICE**

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

*14521 NW 88 Place  
Miami Lakes FL 33018*

### **ARTICLE III- SHARES**

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

*One Hundred (100) Shares of One Dollar (\$1.00) per value common stock.*

### **ARTICLE IV- INITIAL REGISTERED AGENT AND STREET ADDRESS**

*The name and address of the initial registered agent is:*

*Yoankis Muñoz  
14521 NW 88 Place  
Miami Lakes FL 33018*

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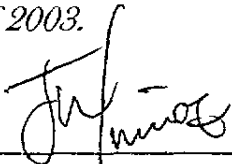
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**ARTICLE V- INCORPORATION**

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

*Yoankis Muñoz  
14521 NW 88 Place  
Miami Lakes FL 33018*

*This undersigned incorporation has executed the Articles of Incorporation this 4 day of September of 2003.*

  
\_\_\_\_\_  
Signature

**ARTICLES VI- DIRECTOR(S)**

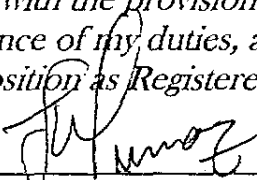
*The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):*

*Yoankis Muñoz                      President  
14521 NW 88 Place  
Miami Lakes FL 33018*

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**CERTIFICATE OF DESIGNED OF REGISTERED AGENT/ REGISTERED OFFICE**

*Having been named as Registered Agent and to accept services 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