Division of Comporations

Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0381

P'rom:

Account Name : INCORPORATETIME.COM, INC.

Account Number : I19990000221 Phone : (631)224-9884 Fax Number : (631)589-2848

FLORIDA PROFIT CORPORATION OR P.A.

ARETHA NELSON, M.D., P.A.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
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12/18/2003

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ARTICLES OF INCORPORATION

THE UNDERSIGNED INCORPORATION FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, HEREBY ADOPTS THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE 1 -NAME

THE NAME OF THE CORPORATION SHALL BE:

ARETHA NELSON, M.D., P.A.

ARTICLE II -PRINCIPAL OFFICE

The principal place of business & mailing address of this corporation shall be

1190 NW 95 STREET, STE 406 MIAMI, FL 33150

ARTICLE III -PURPOSE

The Purpose for which the corporation is organized is:

Medical practitioner

ARTICLE IV -SHARES

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

2,000 shares at \$.01 par value

ARTICLE V -INITIAL OFFICERS/DIRECTORS:

President/V.President/Secretary/Director: ARETHA NELSON, M.D. 1190 NW 95TH STREET, MIAMI, FL 33150

ARTICLE VI -INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address of the initial registered agent are:

ARETHA NELSON, M.D. 1190 NW 95TH STREET, MIAMI, FL 33150

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ARTICLE VII-INCORPORATOR:

The name and address of the Incorporator to these Articles of Incorporation are:

Kerry Walsh IncorporateTime.com, Inc. 35-37 Carleton Avenue, Suite 200 Islip Terrace, NY 11752

Kerry Walsh, Incorporator

Date

Having been named registered agent and to accept service of process for the above stated corporation as the 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

ARETHA NELSON, M.D., Registered Agent

Date

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