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LAZARUS CORPORATE FII	LING SERVICE			
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CORPORATION NAME(s) &	DOCUMENT NUMI	BER(S) (if known):		
1 FXCEL HER	ILTH CARE	E, FNC,		
(Corporation Name)		(Document #)		
2. (Corporation Name)		(Document #)	<u> </u>	
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Profit	Amendment			
NonProfit	Resignation of R.A., Officer/Director			
. Limited Liability	Change of Registered Agent			
Domestication	Dissolution/Withdrawal			
Other	Merger		_	
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OTHER FILNGS	REGISTRATIO			
Annual Report	Foreign	QUALIFICATION		
Fictitious Name		Limited Partnership		
Name Reservation	Reinstatement			

Trademark

Examiner's Initials

Other

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:	
EXCEL HEALTH CARE TINO	۲.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall

9154 NW 119 TERRACE HIALEAH GARDEN, FL 33018

Mailing P.D.BOX 1887 BRADENTON, FL. 34206

ARTICLE III -SHARES

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

100

<u>ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS</u>

The name and address of the initial registered agent is:

MARIA C PENA 9154 NW 119 TERRALE HIALEAH GARDEN, FL 33.018.

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is: MARIA C. PENA 9154 NW 119 TERRACE HIALEAM GARDENS, FL 33016
The undersigned incorporator has executed these Articles of Incorporation this 2 day of 1200 2000 2000 Signature
ARTICLE VI- DIRECTOR(S)
The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are): MARIA C. I MA. 915-4 NW 119 TEPPACE 915-4 NW 119 TEP
Angel M Carrasco V.P. P.O. BOX 1887 Brakenton, FL 34206 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 cam familiar with and accept the obligations of my position as Registered Agent. Registered Agent Signature