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To: Division of Corporations
Fax Number : (850)205-0381

From: Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : J20000000257
Phone : (850)224-8870
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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

MEDICO LATINO, INC.

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

**ARTICLES OF INCORPORATION
OF**

MEDICO LATINO, INC.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is **MEDICO LATINO, INC.**

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is **4300 N. University Drive, Suite B-200, Ft. Lauderdale, FL. 33351**

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares having a par value of (1.00) per share.

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ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is **Lisa Leonardo Daniels, Esq.** 4300 N. University Drive, Suite B-200, Ft. Lauderdale, FL. 33351

ARTICLE V: INCORPORATOR

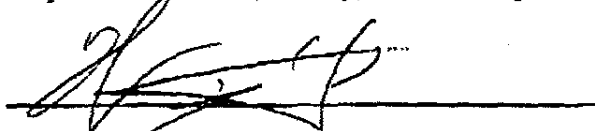
The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

ARTICLE VI: OFFICERS AND DIRECTORS

The name and address of the initial officer and director is **Lisa Leonardo Daniels**, 4300 N. University Drive, Suite B-200, Ft. Lauderdale, FL. 33351

The undersigned has executed these Articles of Incorporation this 14th day of May 2004.

"Capital Connection, Inc. by, Weimar Lopez, Client Representative"

A handwritten signature in black ink, appearing to read 'Weimar Lopez', is written over a horizontal line.

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CLERK OF STATE
TALLAHASSEE FLORIDA

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned 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 is: MEDICO LATINO, INC.

2. The name and street address of the registered agent and office is:

LISA LEONARDO DANIELS, ESQ.
4300 N. UNIVERSITY DRIVE, Suite B-200
FORT LAUDERDALE, FL. 33351

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE CORPORATION AT 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.

Lisa A. Daniels

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