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ARTICLES OF INCORPORATION

TALLAHASSEE, FLORIDA

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:

BEST HEALTHCARE GROUP, INC.

ARTICLE II - PRINCIPAL OFFICE

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

11300 N.W. 89 H COURT SUITE 141 HIRLEAH GARDENS, FC 330/6

ARTICLE III -SHARES

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

1,000

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

HARCHRETH ROSS PERTUZ

11300 N.W 87 Court

SUITE # 141

HIALENH BANDENS, FL 33.016

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:	
MARGHRETH KOSS PERTUZ	
112000 WW 87 COURT SUITE # 141	
HIALED# BAROONS, CL 33016 The undersigned incorporator has executed these Articles of	रीके द्वीरी सक. काला कर
Ine undersigned incorporator has executed these Articles of incorporation this $\underline{\mathcal{I}}$ day of $\underline{\mathcal{I}} \underline{\mathcal{O}} \underline{\mathcal{N}} \underline{\mathcal{E}}$ $\underline{\mathcal{E}}$ 2008	
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Signature	· · · · · · · · · · · · · · · · · · ·
	
ARTICLE VI- DIRECTOR(S)	
The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):	
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MARCHNOTH ROSS PERTUZ (Pris	1000/
11300N. W. 87 Court	nggar Tanan sa
SUITE # 141	
HIALOAH GARdens, PC 33016	· · · · · · · · · · · · · · · · · · ·
EDGARDO J. ARIZA H.D. (MEDICAL DIRECT	TOR
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 I am familiar with and accept the obligations of my position as Registered Agent.	무
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Registered Agent Signature	至一