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FILED OFFICE USE ONLY(DOCUMENT #) 04 AUG 23 AM 11: 26 SECKETARY OF STATE TALL AHASSEE, FLORIDA 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): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time Certified Copy. Mail out Will wait Photocopy Certificate of Status NEW FILINGS AMENDMENTS Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILNGS REGISTRATION/ QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership

Reinstatement

Examiner's Initials

Trademark

Other

CR2E031(9/92)

Name Reservation

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:

MAKUZA MEDICAL CENTER, INC.

ARTICLE II - PRINCIPAL OFFICE

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

P.D. Box 160271 MIAMI, FC. 33/16-0271

ARTICLE III -SHARES

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

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

FRANKIN DE LA MOTA. 93625W97CT MIAMI, FL 33176

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ARTICLE V - INCORPORATOR

SECKETARY OF STATE TALLAHASSEE, FLORIDA The name and street address of the incorporator to these Articles of Incorporation is: FRANKLIN DE LA MOTA.

P.O. BOX 160271

MIAMI, FC. 33/16-0271

The undersigned incorporator has executed these Articles of Incorporation this 20 day of August 2004

ARTICLE VI- DIRECTOR(S)

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

> FRANKLIN DE LA MOTA. (P P.O. BOX 160271

MIAMI, FC. 33116-0271

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.