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NEW FILINGS	AMENDMENTS
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NonProfit	Resignation of R.A., Officer/Director
. Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger
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OTHER FILINGS	REGISTRATION/ QUALIFICATION
Annual Report	Foreign
Fictitious Name	Limited Partnership
Name Reservation —	Reinstatement
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Examiner's Initials

CR2E031(9/92)

ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming \overline{a} \overline{c} \overline{c} (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:

GÉA MEdical BIlling SERVICE Inc.

ARTICLE II - PRINCIPAL OFFICE

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

713 N.W 132 PLACE MIOMI, FL. 33182

ARTICLE III -SHARES

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

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

YESSENIA A. RAMIREZ 713 N.W 132 PLACE Miami FL 33182

<u>ARTICLE V - INCORPORATOR</u>

The name and street address of the incorporator to these Articles of			
Incorporation is: VESSENIA A.	KANIREZ		
47.5	NAIF		

713 N.W 132 PLACE HIAM; PL 33182

The undersigned incorporator has executed these Articles of Incorporation this 24 day of Fab 2005

ARTICLE VI- DIRECTOR(S)

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

YESSENIA A. RANIREZ (PRESE deNt) 713 N.W 132 PLACE ASSET TO MIGME, PL 33182 SERVED TO

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.

Registered Agent Signature