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CORPORATION NAME(s) & DOG	CUMENT NUMI	BER(S) (if know): 	
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(Corporation Name)		(Document #)		
2. (Corporation Name)		(Document #)		
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NEW FILINGS	AMENDME	ENTS		
Profit	Amendment			
NonProfit	Resignation of R.A., Officer/Director			
. Limited Liability	Change of Registered Agent			
Domestication	Dissolution/Withdrawal			
Other	Merger			
OTHER FILINGS	REGISTRATION			
Annual Report	QUALIFICATIO	N. A. C.		
Fictitious Name	Foreign			
Name Reservation	Limited Partnersh	ip		
	Reinstatement			
<u> </u>	Trademark			
	Other	1	Commission Initials	!

Examiner's Initials

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.

ARTICIE I - NAME

The name of the corporation shall be:

KAY Medical Services, Copp.

ARTICLE II - PRINCIPAL OFFICE

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

10300 Sunset Dr Suite: 275-0 Minul, Fl, 33173

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:

AIDA BARREDO B720 SW 154 Circle PL HIAMI, 74, 33193

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of incorporation is:

AIDA BARREDO

8720 SW 154 Circle PL Minni, FG33193

The undersigned incorporator has executed these Articles of Incorporation this 10 day of MARZO 2005

<u>GBarreelo</u> Signature

ARTICLE VI- DIRECTOR(S)

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

AIDA BARREDO.

Presidente.

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