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| LAZARUS CORPORATE FILING | G SERVICE |
| 3320 S.W. 87 AVENUE | |
| MIAMI, FLORIDA (305)552-5973 | |
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| CORPORATION NAME(S) & DOG | CUMENT NUMBER(S) (if known): |
| 1. CAMINO MEDI | |
| (Corporation Name) | (Document #) |
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| NEW FILINGS | AMENDMENTS 5 |
| Profit | Amendment |
| NonProfit | Resignation of R.A. Officer/Director |
| . Limited Liability | Change of Registered Agent |
| Domestication | Dissolution/Withdrawal |
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| OTHER FILIGS | REGISTRATION/ |
| Annual Report | QUALIFICATION |
| Fictitious Name | Foreign |
| Name Reservation — | Limited Partnership |
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Examiner's Initials

CR2E031(9/92)

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 L - NAME

The name of the corporation shall be:

CAMINO MEDICAL CENTER CORP.

ARTICLE II - PRINCIPAL OFFICE

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

930 HIALEAH DRIVE - SUITE#15 HIALEAH, FL 33010

ARTICLE III -SHARES

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

/00

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MANUEL L. GONZALEZ 1601 N.W 30TH AVE. MIAMI, FL 33125 O5 I''S SI SI

ARTICLE V - INCORPORATOR

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

MANUEL L. GOUTALEZ 930 HIALEAH DRIVE SHITE #15

The undersigned incorporator has executed these Articles of Incorporation this 23 day of MARCH 2005

ARTICLE VI- DIRECTOR(S)

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

Manuel L Gonzalez 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.

Legistered Agent Signature