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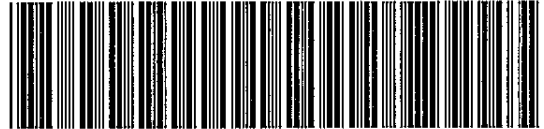
(Business Entity Name)

(Document Number)

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**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. INNOVA MEDICAL SERVICES INC.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

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**NEW FILINGS**

- ☒ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

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.

### ARTICLE I - NAME

The name of the corporation shall be:

*INNOVA MEDICAL SERVICES INC.*

### ARTICLE II - PRINCIPAL OFFICE

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

*40 NE 1 AVE Suite #601.  
MIAMI FL, 33132.*

### 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:

*MARCIA SORGE  
15165 SW 59 St  
Miami FL 33193*

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TALLAHASSEE, FLORIDA

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**ARTICLE V - INCORPORATOR**

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

GRISELLE DE LA TORRE  
9581 Fontainebleau Blvd apt 310  
Miami FL 33172.

MARCIA SORGE  
15165 SW 59 St  
Miami FL 33193.

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

Marcia Sorge  
Signature

**ARTICLE VI- DIRECTOR(S)**

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

GRISELLE DE LA TORRE (President)  
MARCIA SORGE (Vice P.)  
15165 SW 59 St  
Miami FL 33193.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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.

Marcia Sorge