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Hampton
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Florida Department of State
Division of Corporations
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FLORIDA PROFIT CORPORATION OR P.A.

MIAMI HEALTH CARE NECESSITY & SERVICES INC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

August 12, 2005

EXPRESS CORPORATE FILING SERVICE

SUBJECT: MIAMI HEALTH CARE NECESSITY & SERVICES INC.
REF: W05000038200

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Tammy Hampton
Document Specialist
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FAX Aud. #: H05000192873
Letter Number: 305A00051759

(((H05000192873)))

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

MIAMI HEALTH CARE NECESSITY & SERVICES INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1635 WEST 44TH PLACE
APT 210
HIALEAH, FL 33012

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

MARTIN E. PEREZ (PD)
1635 WEST 44TH PLACE
APT 210
HIALEAH, FL 33012

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

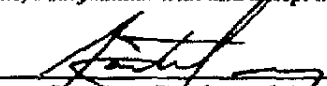
MARTIN E. PEREZ
1635 WEST 44TH PLACE
APT 210
HIALEAH, FL 33012

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:


MARTIN E. PEREZ
1635 WEST 44TH PLACE
APT 210
HIALEAH, FL 33012

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

AUGUST 11, 2005
Date



Signature/Incorporator

AUGUST 11, 2005
Date

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