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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

COMPLETE MEDICAL BUSINESS DEVELOPMENT, INC.

D. WHITE SEP - 8 2005

Certificate of Status	0
Certified Copy	1
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ARTICLES OF INCORPORATION OF COMPLETE MEDICAL BUSINESS DEVELOPMENT, INC.

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TÄLLAHASSEE, FLÖRID.

The undersigned incorporator for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of this corporation is COMPLETE MEDICAL BUSINESS DEVELOPMENT, INC.

ARTICLE II PRINCIPAL OFFICE

The physical business and mailing address of this corporation shall be:

11350 Quail Roost Dr. Miami, FL 33157

ARTICLE III SHARES

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

1000 shares of \$1.00 per value common stock

ARTICLE IV INITIAL BOARD OF DIRECTORS

This corporation shall have two (2) directors initially. The number of directors may be increased or diminished from time to time in accordance with by-laws adopted by the stockholders. The names and addresses of the initial board of directors are:

NAME	ADDRESS
Humberto Bogani	11350 Quail Roost Dr.
President, Treasurer	Miami, FL 33157
Janice Armistead	11350 Quail Roost Dr.
Vice President, Secretary	Miami, FL 33157

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ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS AND MALLAHASSEE, FLORIDA

The name and Florida street address of the initial registered agent is:

Humberto Bogani 11350 Quail Roost Dr. Miami, FL 33157

ARTICLE VI INCORPORATOR

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

Janice Armistead 11350 Quail Roost Dr. Miami, FL 33157

Japice Armistead

September 7th 2005

ACKNOWLEDGMENT:

Having been named as registered agent and to accept service of process for the above stated corporation at the 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.