Electronic Articles of Incorporation For

P05000147474
FILED
November 03, 2005
Sec. Of State
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CLINICAL CARE PROVIDERS INC.

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation is:

CLINICAL CARE PROVIDERS INC.

Article II

The principal place of business address:

PO BOX 8567 CORAL WAY
241
MIAMI, FL. US 33155

The mailing address of the corporation is:

PO BOX 8567 CORAL WAY
241
MIAMI, FL. US 33155

Article III

The purpose for which this corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The number of shares the corporation is authorized to issue is:

100 SHARES

Article V

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

ARMANDO BELLON
15290 SW 30TH TERRACE
MIAMI, FL. 33185

I certify that I am familiar with and accept the responsibilities of registered agent.

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Registered Agent Signature: ARMANDO BELLON

Article VI

The name and address of the incorporator is:

ARMANDO BELLON
PO BOX 8567 CORAL WAY
241
MIAMI, FL 33155

Incorporator Signature: ARMANDO BELLON

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: PD
ARMANDO BELLON
PO BOX 8567 CORAL WAY - # 241
MIAMI, FL. 33155 US