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SECRETARY OF STATE
DIVISION OF CORPORATION
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FLORIDA PROFIT CORPORATION OR P.A.

QUALITY CARE NETWORK SERVICES, INC.

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

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SECRETARY OF STATE
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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:

QUALITY CARE NETWORK SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1840 WEST 49TH STREET - 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:

SHARES: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

FRANCISCO CIRILO - P/VP/T
1840 WEST 49TH STREET - HIALEAH, FL 33012

ARTICLE VI REGISTERED AGENT

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

FRANCISCO CIRILO
1840 WEST 49TH STREET - HIALEAH, FL 33012

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

FRANCISCO CIRILO
1840 WEST 49TH STREET - HIALEAH, FL 33012

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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

F Cirilo

Signature/Registered Agent — DECEMBER 06, 2005 — Date

Cirilo

Signature/Incorporator — DECEMBER 06, 2005 — Date