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Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
JUVENTUS MEDICAL CENTER INC.

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January 9, 2006

FLORIDA DEPARTMENT OF STATE
Division of Corporations

FAS-T CORP AGENTS INC

SUBJECT: JUVENTUS MEDICAL CENTER INC.
REF: W06000000936

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FAX Aud. #: H06000004977
Letter Number: 006A00001414

ARTICLE OF INCORPORATION

OF

JUVENTUS MEDICAL CENTER INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: JUVENTUS MEDICAL CENTER

The principal place of business of this corporation shall be:
13840 SW. 71 LN.
MIAMI, FL. 33183

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:

100 X \$10.00 = \$1,000.00

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

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ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

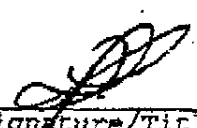
Vivian Gutierrez	DIRECTOR
13840 SW. 71 LN.	
MIAMI, FLORIDA 33183	

ARTICLE VI INCORPORATOR(S)

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

VIVIAN GUTIERREZ	PRESIDENT, SECRETARY & TREASURER
13840 SW. 71 LN.	100 shares
MIAMI, FLORIDA 33183	

The undersigned has(have) executed these Article of Incorporation this 6 th. day of January, 2006.



Signature/Title

Signature/Title

Signature/Title

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: JUVENTUS MEDICAL CENTER INC.

2. The name and address of the registered agent and office
is VIVIAN GUTIERREZ
(Name)

13840 SW. 71 LN.

(P. O. BOX NOT ACCEPTABLE)

MIAMI, FLORIDA 33183

(CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED 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 MY POSITION AS REGISTERED AGENT.

SIGNATURE 

DATE 1-6-85

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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