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LAZARUS CORPORATE FILING SERVICE

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CORPORATION NAME(S) & DO	OCUMENT NUMBER(S), (if known):
1. ORTILLA MED (Corporation Name)	CAL CENTER CORP (DOCUMENT #)
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3. (Corporation Name)	(Document #)
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Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other
	Examiner's Initials

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SECRETARY OF STATE
ALL AHASSEF FLORIDA

ARTICLES OF INCORPORATION

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

ARTICLE 1 - NAME

The name of the corporation shall be: Portilla Medical Center Corp

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

42 NW 27 AVE BUTE 408 Meani FL 33125.

ARTICLE III - SHARES

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

1,000

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

42 NW 27 Ave Soite 408

M(am F/ 33125

Martha lopez-PortILLA

06 MAR -7 PM 2: 54

SECRETARY OF STATE
TALL AHASSEF FLORIDA

ARTICLE V - INCORPORATOR

The name and street	address of t	he incorporațo	r to these	Articles of
The name and street Incorporation is:	Martha	Lopez-Portil	16·	
	420	w 27 Ave	suite	408
	Med	rain F1 3	3/25	
			-	

The undersigned incorporator has executed these Articles of Incorporation this day of 2005.

Signature

ARTICLE VI- DIRECTOR (S)

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

Martha lopes-Portiller President

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

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

Registered Agent Signature