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LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Certified Copy Pick up time 2.06 Photocopy ☐ Mail out Certificate of Status Will wait **AMENDMENTS NEW FILINGS Profit** Amendment Resignation of R.A., Officer/Director Not for Profit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/QUALIFICATION **OTHER FILINGS** Foreign Annual Report Limited Partnership ☐ Fictitious Name Reinstatement Trademark Other

Examiner's Initials

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 I - NAME

The name of the corporation shall be:

SERENITY MEDICAL CARE THE SERVICE

ARTICLE II - PRINCIPAL OFFICE

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

15564 SW 16 ST MiAMI F/ 33185

ARTICLE III -SHARES

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

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MANUEL OBANDO 15564 SW 165+ MIAMIF/ 33185

ARTICLE V - INCORPORATOR

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

MANUEL OBANDO 15564 SW 16 ST MANNI F/ 33185

The undersigned incorporator has executed these Articles of Incorporation this day of // (2006

Signature

ARTICLE VI- DIRECTOR(S)

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

MANUEL OGANDO - 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 a m familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature