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PICK-UP	WAIT MAIL	
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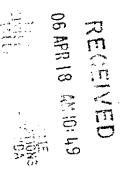
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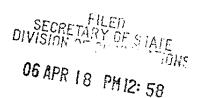
LAZARUS CORPORATE FILING SERVICE

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 2.00 Mail out Will wait Photocopy Certificate of Status NEW FILINGS **AMENDMENTS** Profit -Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/QUALIFICATION Foreign Annual Report Fictitious Name Limited Partnership Reinstatement Trademark Other

Examiner's Initials

CR2E031(7/97)



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:

Caribe Medical Services AMM Inc.

ARTICLE II - PRINCIPAL OFFICE

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

P.O Box # 57 Ensenada P.R. 00647

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:

Armando Montiel 13765 SW 154 ST Miami FL 33177

ARTICLE V - INCORPORATOR

The name and street address of the incorporation is:	ncorporator to these Articles of
Armando	Montiel
13765 SW	154 or
The undersigned incorporator has ex	し 33177 recuted these Articles of
Incorporation this day of	200 6 .
Qa la	20 to 1)

ARTICLE VI- DIRECTOR (S)

Signature

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

Armando Montiel-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 Agents

Registered Agent Signature

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