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LAZARUS CORPORATE FILING SERVICE

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MIAMI, FL 33165 (305) 552-5973 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Document #) (Corporation Name) (Corporation Name) (Document #) Pick up time Certified Copy Walk in Photocopy ■ Mail out Will wait Certificate of Status NEW FILINGS **AMENDMENTS** Profit Amendment Resignation of R.A., Officer/Director Not for Profit Change of Registered Agent Limited Liability Domestication Dissolution/Withdrawal Other Merger REGISTRATION/QUALIFICATION OTHER FILINGS Annual Report Foreign Fictitious Name Limited Partnership 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:

Solution MEDICAL STAFFING, INC.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall

139 NE 1 ST # 625 MIAMI, FL 33/32 ARTICLE III - SHARES

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

100 \$ 1.00 per share

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ENRIQUE PLASENCIA

139 NE 1 ST # 625 MIAMI, FL 33132

ARTICLE V - INCORPORATOR

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

139 NE IST # 625

MIAMI, FL 33/32

The undersigned incorporator has executed these Articles of incorporation this day of

D 6 Signatura

ARTICLE VI- DIRECTOR(S)

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

ENRIQUE PLASENCIA
139 NE 1 ST # 625
MIAMI, FL 33132

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