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To:
     Division of Corporations
     Fax Number      : (850)205-0381

From:
     Account Name    : FAS-T CORP. AGENTS, INC.
     Account Number  : 071001002336
     Phone           : (305)599-0839
     Fax Number      : (305)716-0346
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FLORIDA PROFIT/NON PROFIT CORPORATION

I.R.H. MEDICAL OFFICE, CORP.

Certificate of Status	0
Certified Copy	1
Page Count	03
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VH

ARTICLES OF INCORPORATION
OF

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:

I.R.N. MEDICAL OFFICE, CORP.

The principal place of business of this corporation shall be:

42 N.W. 27th Avenue Suite # 406
Miami, Florida 33125

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 value that this corporation is authorized to have outstanding at any one time is: 100 Shares @ 1.00/ Par Value

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(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):

PRESIDENT:	HENRY LORA	33.3% Shares
Vice- President :	ISABEL MEDINA	33.3% Shares
Secretary:	RAFAEL ARCA	33.3% Shares

ADDRESS FOR ALL OFFICERS: 42 N.W. 27th Avenue
406
Miami, Florida 33125

ARTICLE VI - INCORPORATOR(S)

The name(s) and street address(es) of the incorpor (s) to this articles of incorporation is(are):

Henry Lora
Isabel Medina
Rafael Arca

42 N.W. 27th Avenue # 406
Miami, Florida 33125

IN WITNESS WHEREOF, the undersigned incorporator has (have) executed these Articles of Incorporat this, 3rd day of AUGUST [illegible]

Signature(s) of Incorporator

Henry Lora - President

Isabel Medina - Vice Preside

Rafael Arca - Secretary

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CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Fl Statutes, the undersigned corporation, organized u the laws of the State of Florida, submits the follc statement in designating the registered office/regis agent, in the State of Florida.

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS AUG -4 AM 11:07

1. The name of the corporation:

I.R.H. MEDICAL OFFICE, CORP

2. The name and address of the registered agent and office is:

ISABEL MEDINA

(P.O. BOX NOT ACCEPTABLE)

42 N.W. 27th Avenue # 406

(CITY/STATE/ZIP)

Miami, Florida 33125

SIGNATURE

ISABEL MEDINA

TITLE Vice President

DATE 8/3/06

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN T CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, ANI FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATU RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTI 607.325, FLORIDA STATUTES.

SIGNATURE

ISABEL MEDINA

DATE 8/3/06