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

From:
Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

FLORIDA PROFIT/NON PROFIT CORPORATION

ITURBURU HEALTH CARE SERVICES, INC.

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

ITURBURU HEALTH CARE SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

11294 S.W. 43 STREET, MIAMI FL 33165

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO ENGAGE IN LAWFULL BUSINESS IN THE STATE OF FLORIDA

ARTICLE IV SHARES

The number of shares of stock is:

100 @ \$10.00 PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

ZULLY D. ITURBURU, PRESIDENT
11294 S.W. 43 STREET
MIAMI, FL 33165

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

ZULLY D. ITURBURU
11294 S.W. 43 STREET
MIAMI, FL 33165

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ZULLY D. ITURBURU
11294 S.W. 43 STREET
MIAMI, FL 33165

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Zully Dalia Iturburu
Signature/Registered Agent

08/07/2006

Date

Zully Dalia Iturburu
Signature/Incorporator

08/07/2006

Date