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LAZARUS CORPORATE FILING SEI 3320 SW 87 TH AVENUE MIAMI, FL 33165 305-552-5973	RVICE	
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CORPORATION NAME(S) & DOC		•
1. MEDIC WORLD (Corporation Name)) INC	·
(Corporation Name)	(Document #)	
2	and,	
(Corporation Name)	(Document #)	·
3. '		
(Corporation Name)	(Document #)	
4. (Corporation Name)	(Document #)	•
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OTHER FILINGS	REGISTRATION/QU	<u>ALIFICATION</u>
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other)
		Examiner's Initials

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ARTICLES OF INCORPORATION

SECHETARY OF STATE TALLAHASSEE, FLORIDA

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:

MEDIC WORLD TNC

ARTICLE II - PRINCIPAL OFFICE

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

15741 SW 11 TERR MIAMI, FC 33194

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:

ROBERTO PEREZ 15471 S.W 11TERR MIAMI, FZ 33194

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SLORETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE V - INCORPORATOR

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

ROBERTO PENEZ 15471 S.W 11 TERR

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):

ROBERTO PEREZ (P) 15471 S.W 11 TERR MIAMI, FL: 33194

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