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Division of Corporations

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BECKE FARY OF STATE
ALLAHASSEF, FIORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION

HealthBiz Corp.

| Certificate of Status | 1 |
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10/25/2006

ARTICLES OF INCORPORATION

'he 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:

HealthBiz Corp.

ARTICLE II PRINCIPAL OFFICE

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

Health Biz Corp. 2465 San Pietro Circle Palm Beach Gardens, FL 33410 O6 OCT 25 AH II: 17
SECRETARY OF STATE ALLAHASSEE, FLORIDA

ARTICLE III SHARES

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

200 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Bruce Henry 2465 San Pietro Circle Palm Beach Gardens, FL 33410

Prepared By:
Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940

ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

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

Bruce Henry - President/Director 2465 San Pietro Circle Palm Beach Gardens, FL 33410

ARTICLES VI INCORPORATOR(S)

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

Bruce Henry 2465 San Pietro Circle Palm Beach Gardens, FL 33410

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

24th day of October 2006.

Signature

H06000260080

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

| 1. The name of the corporation is: HealthBiz Corp. | |
|--|--|
| | , |
| | |
| 2. The name and address of the registe | ered agent and office is: |
| | Bruce Henry |
| | ###################################### |
| | Name |
| | 2465 San Pietro Circle |
| | (P.O. Box or Mail Drop Box NOT Acceptable) |
| | Palm Beach Gardens, FL 33410 |
| | (City / State / Zip) |

Having been named as registered agent and to accept service of process for the above stated corporation at the 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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Bruce Henry SIGNATURE October 24, 2006SEE. FLORIDA

October 26, 2006SEE. FLORIDA

(Date)