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(City/State/Zip/Phone #)

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(Business Entity Name)

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DEPT. OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. WHITE FEB 26 2007

COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Renaissance Healthcare Systems
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)
USA Inc.

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Tracy Whited
Name (Printed or typed)

3676 Hartsfield Rd.
Address

Tallahassee, FL, 32318
City, State & Zip

(850) 459-6595
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Renaissance Healthcare Systems USA Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3676 Hartfield Rd.
Tallahassee, FL 32318

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide intergrated medical services to
diverse populations regardless of socioeconomic
status.

ARTICLE IV SHARES

The number of shares of stock is: 25,000,000 common stock

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Sarah Malcome VP Services
DR. ^{Kirby} Andon VP Medical Research
DR. ^{Kirby} Solamit VP Pharmacentical/Applied Pharmaceuticals
Thomas T. Whited President

ARTICLE VI REGISTERED AGENT

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

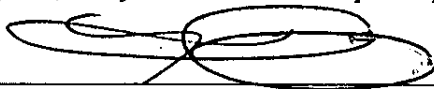
Thomas Whited
3676 Hartfield Rd
Tallahassee, FL 32318

ARTICLE VII INCORPORATOR

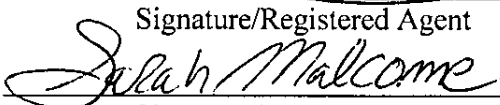
The name and address of the Incorporator is:

Sarah Malcome
233 Colledge Lane
Avondale Estates GA 30002

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



Signature/Registered Agent



Signature/Incorporator

26 Feb 07

Date

2/26/07

Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA