

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

From:
Account Name : FASTKIT CORPORATE OUTFITS
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

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FLORIDA PROFIT/NON PROFIT CORPORATION**RAINBOW HEALTH PROFESSIONALS, INC.**

Certificate of Status	0
Certified Copy	1
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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:

RAINBOW HEALTH PROFESSIONALS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

**7375 NW 173 DR #103
MIAMI, FL 33015**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FOR PROFIT

ARTICLE IV SHARES

The number of shares of stock is:
100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

**MAGALY DIEGUEZ - PRESIDENT
7375 NW 173 DR #103
MIAMI, FL 33015**

Prepared by: L. Toyos Tax Service 7236 SW 8 St. Miami, FL 33144

ARTICLE VI REGISTERED AGENT

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

MAGALY DIEGUEZ
7375 NW 173 DR. #103
MIAMI, FL 33015

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MAGALY DIEGUEZ
7375 NW 173 DR. #103
MIAMI, FL 33015

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

M. Dieguez 3/5/07
Signature/Registered Agent Date

M. Dieguez 3/5/07
Signature/Incorporator Date

Prepared By: L. Toyos Tax Service 7256 SW 8 Street, Miami, FL 33144

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