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FLORIDA PROFIT/NON PROFIT CORPORATION

ATLANTIC CARE SOLUTION, INC.

Certificate of Status	0
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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:

ATLANTIC CARE SOLUTION, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6262 BIRD ROAD # 3-K
MIAMI, FL 33155

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

SHARES: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

IRVING PEREZ (P/D)
6262 BIRD ROAD # 3-K
MIAMI, FL 33155

ARTICLE VI REGISTERED AGENT

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

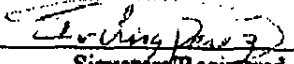
IRVING PEREZ (P/D)
6262 BIRD ROAD # 3-K
MIAMI, FL 33155

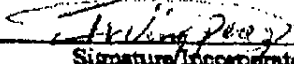
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

IRVING PEREZ (P/D)
6262 BIRD ROAD # 3-K
MIAMI, FL 33155

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

04-12-07

Date
04-12-07

Date

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