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LAZARUS CORPORATE FILING SERVICE

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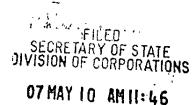
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EILED SECRETARY OF STATE DIVISION OF CORPORATIONS

07 MAY 10 AM 11:46

MIAMI, FL 33105 (305) 352-35		
	Office Use Only	•
CORPORATION NAME(S) & DOCUME	ENT NUMBER(S), (if known):	
HEALTH CARE F	ROFESSIONAL	
(Corporation Name)	(Document #)	
2. SERVICES INC	·	
(Corporation Name)	(Document #)	
3. (Corporation Name)	(Document #)	
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(Corporation Name)	(Document #)	,
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NEW FILINGS	<u>AMENDMENTS</u>	
Profit	☐ Amendment	
Not for Profit	Resignation of R.A., Officer/Director	
Limited Liability	Change of Registered Agent	
Domestication Other	Dissolution/Withdrawal Merger	
OTHER FILINGS	REGISTRATION/QUALIFICATION	
Annual Report	☐ Foreign	
☐ Fictitious Name	Limited Partnership	
	Reinstatement Trademark	
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•	Examiner's Initials	

CR2E031(7/97)



ARTICLES OF INCORPORATION

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 1 - NAME

The name of the corporation shall be: HEALTH CARE PROFESSIONAL SERVICES INC.

<u>ARTICLE II - PRINCIPAL OFFICE</u>

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

7191 SW 8 St Miami, FL 33144

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:

BLANCA Ruiz 7191 SW 85T MiAMI, FL 33144

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of	f
meorporation this (day-of) 2007	SECRETARY OF STATE DIVISION OF CORPORATIONS 07 MAY 10 AM 11: 46
ARTICLE VI- DIRECTOR(S)	
The name(s) and street address (es) of the director(s) to these Article	les of
Incorporation is (are): BLANCA RUIZ - PRESIDENT	

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