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Florida Department of State
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : BUSINESS WORLD TRANSACTIONS, INC.
Account Number : 104512000707
Phone : (305) 266-4080
Fax Number : (305) 267-8626

FLORIDA PROFIT/NON PROFIT CORPORATION**MEGIAS MEDICAL CENTER, INC.**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 04 |
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**ARTICLES OF INCORPORATION**

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I**NAME**

The name of the corporation shall be: MEGIAS MEDICAL CENTER, INC.

ARTICLE II**PRINCIPAL OFFICE**

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

209 PARK BLV.
MIAMI, FL. 33126

ARTICLE III**SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: One Thousand (1,000) shares of One Dollar (\$1.00) par value common stock, which shall be designated ☐ COMMON SHARES. ☐

ARTICLE IV**INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

LOURDES RODRIGUEZ
209 PARK BLV.
MIAMI, FL. 33126

Prepared by: LOURDES RODRIGUEZ
209 PARK BLV.
MIAMI, FL. 33126
305 9624967

Electronically Sent By: BUSINESS WORLD TRANSACTIONS, INC.
7931 S.W. 40 ST. (BIRD RD.) #29
MIAMI, FL. 33155
(305) 267-8686

**ARTICLE V
INCORPORATOR(S)**

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

LOURDES RODRIGUEZ
209 PARK BLV.
MIAMI, FL. 33126

DIRECTOR & PRESIDENT

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

31 day of OCTOBER, 2007.


Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

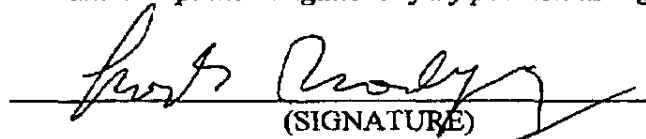
1. The name of the corporation is: MEGLAS MEDICAL CENTER, INC.

2. The name and address of the registered agent and office is:

LOURDES RODRIGUEZ
209 PARK BLV.
MIAMI, FL. 33126

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 statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(SIGNATURE)

(DATE) 10-31-07