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To:

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

From:

Account Name : FASTKIT CORPORATE OUTFITS
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FLORIDA PROFIT/NON PROFIT CORPORATION

OLNA HEALTH CARE SERVICES, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATION

ARTICLES OF CORPORATION

ARTICLES OF INCORPORATION

OF: OLNA HEALTH CARE SERVICES, INC.

THE UNDERSIGNED INCORPORATOR(S), FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA GENERAL CORPORATION ACT, HEREBY ADOPT (S) THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE I.

THE NAME OF THE CORPORATION SHALL BE:
OLNA HEALTH CARE SERVICES, INC.

THE PRINCIPAL PLACE OF BUSINESS OF THIS CORPORATION SHALL BE:
1512 S.W. 106TH AVEUNE
PEMBROKE PINES, FLORIDA 33025

ARTICLE II. NATURE OF BUSINESS

THIS CORPORATION MAY ENGAGE IN OR TRANSACT ANY OR ALL LAWFUL ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES, THE STATE OF FLORIDA,
OR ANY OTHER STATE, COUNTRY, TERRITORY OR NATION.

ARTICLE III. CAPITAL STOCK

THE AGGREGATE NUMBER OF SHARES OF STOCK AND ITS PAR VALUE THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:
\$1.00 PAR VALUE AT @1000 ONE THOUSAND DOLLARS (\$1000.00) AT \$1.00 ONE DOLLAR PAR VALUE.

ARTICLE IV. TERM OF EXISTENCE

THIS CORPORATION IS TO EXIST PERPETUALLY.

ARTICLE V. OFFICERS DIRECTORS

THE NAME (S) AND STREET ADDRESS (ES) OF THE INITIAL OFFICER (S) AND DIRECTOR (S), IF ANY, WHO SHALL HOLD OFFICE THE FIRST YEAR OF THE CORPORATION'S EXISTENCE OR UNTIL THEIR SUCCESSOR (S) IS (ARE) ELECTED, IS (ARE):

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 OCT 30 AM 9:55

APPROVED
AND
FILED

ARTICLES OF CORPORATION

PRESIDENT: OLNA VILSON:
1512 S.W. 108TH AVEUNE
PEMBROKE PINES, FLORIDA 33025

ARTICLE VI. INCORPORATOR (S)

THE NAME (S) AND STREET ADDRESS (ES) OF THE INCORPORATOR (S) TO THIS
ARTICLES OF INCORPORATION IS (ARE):

PRESIDENT: OLNA VILSON
1512 S.W. 108TH AVEUNE
PEMBROKE PINES, FLORIDA 33025


VICE PRES:

PREPARED BY: BARBARA FOUST, P.A.
3401 N.W. 202ND STREET
MIAMI GARDENS, FLORIDA 33056-1722
(305) - 623-6109

IN WITNESS WHEREOF, THE UNDERSIGNED INCORPORATOR (S) HAS (HAVE)
EXECUTED THESE ARTICLES OF INCORPORATION THIS: OCTOBER 16TH, 2008.

ARTICLES OF CORPORATION

SIGNATURE (S) OF THE INCORPORATOR (S)


OLINA VILSON, PRESIDENT

CERTIFICATE OF DESIGNATION

REGISTERED AGENT AND REGISTERED OFFICE



BARBARA A. FOUST
MY COMMISSION # DD 741074
EXPIRES: December 18, 2011
Bonded Thru Budget Notary Service

PURSUANT TO THE PROVISIONS OF SECTION 607.325, 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.

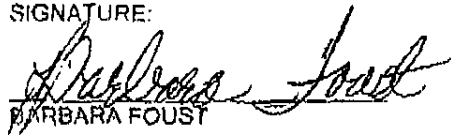
THE NAME OF THE CORPORATION:

OLNA HEALTH CARE SERVICES, INC.

THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

BARBARA FOUST
3401 N.W. 202ND STREET
MIAMI GARDENS, FLORIDA 33056-1722
(305) - 623-5109

SIGNATURE:


BARBARA FOUST

TITLE: REGISTERED AGENT

DATE: OCTOBER 26TH, 2008

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION. AT THE PLACE DESIGNATED IN THIS CERTIFICATE.
I HEREBY AGREE TO ACT IN THIS CAPACITY. AND I FURTHER AGREE TO COMPLY

ARTICLES OF CORPORATION
WITH PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE
PERFORMANCE OF MY DUTIES.
AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA
STATUTES

SIGNATURE:


BARBARA FOUST

DATE:

OCTOBER 26TH, 2008

APPROVED
AND
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 OCT 30 AM 9:55

PREPARED BY: BARBARA FOUST, CPA
3401 N.W. 202ND STREET
MIAMI GARDENS, FLORIDA 33056-1722
(305) - 623-5109 - (OFFICE)

IN WITNESS WHEREOF, THE UNDERSIGNED INCORPORATOR (S) HAS (HAVE) EXECUTED
THESE ARTICLES OF INCORPORATION THIS: OCTOBER 26TH, 2008.