

P08000101853

Division of Corporations

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Florida Department of State  
Division of Corporations  
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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**

**HEALTH 3D, INC.**

Certificate of Status	0
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TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**  
**OF**  
**HEALTH 3D, 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 NAME**

The name of the corporation shall be: HEALTH 3D, INC.

The principle place of business is:  
10520 NW 26<sup>TH</sup> ST., SUITE C 201 DORAL, FL 33172

**ARTICLE II**

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 value that this corporation is authorized to have outstanding at any one time is: 100 SHARES AT \$1.00 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)

P/S GEORGE E. CABANAS 10520 NW 26<sup>TH</sup> ST., SUITE C201  
DORAL, FL 33172

D JOSEPH F. CABANAS 10520 NW 26<sup>TH</sup> ST., SUITE C201  
DORAL, FL 33172

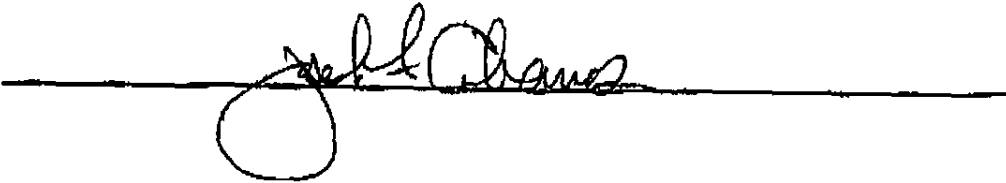
**ARTICLE VI INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

Joseph F. Cabanas ~ Cabanas & Associates  
10520 N.W. 26<sup>th</sup> St.- Suite, C-201  
Doral, FL 33172

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have)  
executed these Articles of Incorporation this

Signature(s) of Incorporator(s)

A handwritten signature, appearing to read "Joseph F. Cabanas", is written over a solid horizontal line. The signature is in cursive and includes a large, stylized initial "J".

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**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

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.

1. The name of the corporation:

HEALTH 3D, INC.

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

Joseph F. Cabanas – Cabanas & Associates, P.A.  
10520 NW 26<sup>th</sup> St. – Suite C 201  
Doral, Fl. 33172

Signature

Title: Registered Agent Date: Nov. 14, 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 WITH THE 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

Date: Nov. 14, 2008

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