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DIVISION OF CORPORATIONS

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FLORIDA PROFIT/NON PROFIT CORPORATION

MILU MEDICAL SERVICES CORP.

Certificate of Status	0
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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 I - NAME

THE NAME OF THE CORPORATION SHALL BE:

Milu Medical Services Corp.

ARTICLE II - PRINCIPAL OFFICE

**THE PRINCIPAL PLACE OF BUSINESS AND MAILING OF THIS
CORPORATION SHALL BE:**

9600 SW 8 St

Suite # 38

Miami Florida 33174

ARTICLE III - SHARES

**THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION
IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:**

100

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS

Gabriel A. Sancez

9600 SW 8 ST Suite#38

Miami Florida 33174

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE V - INCORPORATOR

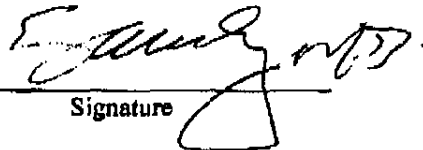
The name and address of the incorporator to these Articles of Incorporation is:

Gabriel A. Sanchez

9600 SW 8 ST Suite # 38

Miami Florida 33174

The undersigned incorporator has executed these Articles of Incorporation
this 1 day of Decemner, 2008.



Signature

ARTICLE VI- DIRECTOR (S)

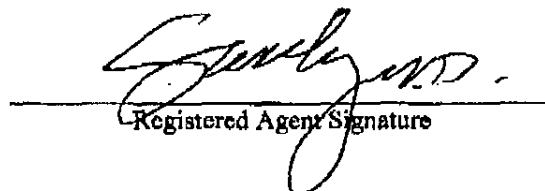
The name(s) and street address(es) of the director(s) to these Articles of
Incorporation is (are):

Gabriel A. Sanchez
9600 Sw 8 ST Suite # 38
Miami Florida 33174
Medical Director
President

Osvaldo Gil
3706 NE 15 ST.
Homestead Florida 33033
Vicepresident

**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

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