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DEPARTMENT OF STATE
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FLORIDA PROFIT/NON PROFIT CORPORATION

CARE HEALTH INSURANCE, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

CARE HEALTH INSURANCE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

10220 SW 215 ST
CUTLER BAY, FLORIDA 33189

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is:

PRESIDENT
ROBERTO ROJAS JR
10220 SW 215 ST
CUTLER BAY, FLORIDA 33189

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PAGE 2 CARE HEALTH INSURANCE, INC.

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

A1A REGISTERED AGENT, INC.
5647 110TH AVENUE NORTH
ROYAL PALM BEACH, FLORIDA 33411

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ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

ROBERTO ROJAS JR
10220 SW 215 ST
CUTLER BAY, FLORIDA 33189

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Ima Makitani MAKI PRES 2/20/09
A1A REGISTERED AGENT, INC. / Registered Agent Date

[Signature]
ROBERTO ROJAS JR. Incorporator

02/20/09
Date