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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch MAR 12 2010

cpa

CHUCK MOGBO, P.A.

Certified Public Accountant

Suite 209
2800 W. Oakland Park Blvd.
Oakland Park, FL 33311
Tel (954) 739-4669
Tel (954) 739-1966
Fax (954) 739-0889

March 09, 2010

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32399

Dear Sirs,

RE: ARTICLES OF INCORPORATION RE:GOLD COAST MEDICAL CLINIC, INC.

Enclosed is Articles of Incorporation for GOLD COAST MEDICAL CLINIC, INC., as well as check in the amount of Seventy Eight Dollars & Seventy Five Cents (\$78.75) for each.

Please process information and return them to us as soon as it is completed.

If I can be of further assistance, please call me at (954) 739-4669 or (954) 739-1966.

Sincerely,



CHUCK MOGBO, C.P.A.

Encl.

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION
FOR**

GOLD COAST MEDICAL CLINIC, INC.

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

ARTICLE I- NAME

The name of the corporation shall be: GOLD COAST MEDICAL CLINIC, INC.

ARTICLE II- PRINCIPAL OFFICE

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

12205 N.W MIAMI COURT
NORTH MIAMI, FL 33172

ARTICLE III- CAPITAL STOCK

The number of share of stock that this corporation is authorized to have outstanding at any one time is:

100,000 SHARES HAVING A PAR VALUE OF ONE DOLLAR
(\$1.00) PER SHARE. THE CONSIDERATION TO BE PAID
FOR EACH SHARE OF STOCK SHALL BE FIXED BY THE
BOARD OF DIRECTORS.

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CHUCK MOGBO, P.A.
2800 W. OAKLAND PARK BLVD.
SUITE 209
OAKLAND PARK, FL 33311

ARTICLE V - INCORPORATOR(S)

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

Margaret Martin
341 N.E 26th Street
Pompano Beach, FL 33064

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

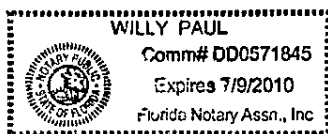
9th day of March, 2010.

Signature

STATE OF FLORIDA
COUNTY OF BROWARD

Before me, the undersigned authority, duly authorized to administer oaths and take acknowledgments, personally appeared the subscriber(s), who after first being duly sworn, executed the foregoing Certificate of Incorporation, freely and voluntarily for the purpose therein expressed.

In witness whereof, I have hereunto set my hand and official seal at Fort Lauderdale, said county and state, this 9th day of MARCH, 2010.



NOTARY PUBLIC
at Large

State of Florida

My commission expires: 07/09/2010

ARTICLE VI - NATURE OF BUSINESS

This Company is incorporated to engage in or transact any or all lawful activities of business permitted under the laws of the United States, the State of Florida, or any other State, County, Territory or Nation.

ARTICLE VII- TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VIII- OFFICERS

The name(s) and post office address(es) of the members of the Board of Directors and officer(s) who shall hold office for the corporation is (are) as follows:

Margaret Martin/ President/Secretary
341 N.E 26th Street
Pompano Beach, FL 33064

ARTICLE IX - BYLAWS

The Bylaws of this Corporation may be adopted, altered, amended or repealed by either the Shareholders or Directors.

ARTICLE X - INDEMNIFICATION

This Corporation shall indemnify any Officer or Director, or any former Officer or Director, to the fullest extent permitted by law.

ARTICLE XI - PREEMPTIVE RIGHTS

Every Shareholder, upon the sale for cash of any new stock of this Corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his prorata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE XII - AMENDMENT

This Corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, in accordance with the provisions of the Florida Business Corporation Act.

CERTIFICATE OF DESIGNATION
REGISTERED/AGENT REGISTERED OFFICE

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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Pursuant to the provisions of sections 607.0501, Florida Statutes, the Undersigned Corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered agent/registered office, in the state of Florida.

The name of the corporation is: **GOLD COAST MEDICAL CLINIC, INC.**

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

CHUCK MOGBO, P.A.
2800 W. OAKLAND PARK BLVD.
SUITE 209
OAKLAND PARK, FL 33311

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 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 OBLIGATION OF MY POSITION AS REGISTERED AGENT.

SIGNATURE: _____

CHUCK MOGBO/PRESIDENT

DATE: _____

GOLD COAST MEDICAL CLINIC, INC.