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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 : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORIDA PROFIT/NON PROFIT CORPORATION
usa medical consulting, inc.

Certificate of Status	0
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:
USA MEDICAL CONSULTING, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:
6199 SHADOW TREE LANE
LAKE WORTH, FL 33463

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
ANY AND ALL LEGAL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is:
1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
GABRIELLA SZABO
6199 SHADOW TREE LANE
LAKE WORTH, FL 33463

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** of the registered agent is:
GABRIELLA SZABO
6199 SHADOW TREE LANE
LAKE WORTH, FL 33463

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:
GABRIELLA SZABO
6199 SHADOW TREE LANE
LAKE WORTH, FL 33463

****

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.

Signature/Registered Agent — Date: 04/08/2010

Signature/Incorporator — Date: 04/08/2010

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