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Florida Department of State
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**FLORIDA PROFIT/NON PROFIT CORPORATION
HEALTH CARE SOLUTIONS MEDICAL CENTER CORP.**

Certificate of Status	0
Certified Copy	1
Page Count	03
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August 12, 2010

FLORIDA DEPARTMENT OF STATE

Division of Corporations
LAZARUS CORPORATE FILING SERVICE, INC.

SUBJECT: HEALTH CARE SOLUTIONS MEDICAL CENTER CORP.
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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:

HEALTH CARE SOLUTIONS Medical Center
Corp.

ARTICLE II - PRINCIPAL OFFICE

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

3900 W FLAGLER ST
Miami FL 33134

ARTICLE III - SHARES

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

100.

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LEOBEL FERRALES
3900 W FLAGLER ST
Miami FL 33134

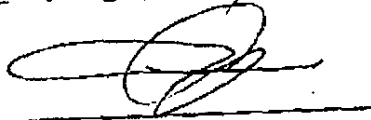
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ARTICLE V - INCORPORATOR

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

LEOBEL FERRALES
3900 W FLAGLER ST
MIAMI FL 33134

The undersigned incorporator has executed these Articles of Incorporation this
11 day of AUGUST 20 10.


Signature

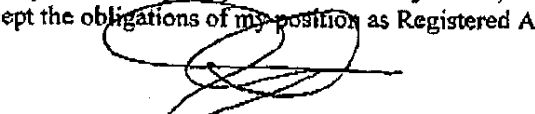
ARTICLE VI - DIRECTOR (S)

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

LEOBEL FERRALES (President)

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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