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Florida Department of State **Division of Corporations Electronic Filing Cover Sheet**

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FLORIDA PROFIT/NON PROFIT CORPORATION **CMA HEALTHCARE SOLUTIONS, CORP**

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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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:

CMA HEALTHCARE Solutions, Conp

ARTICLE II - PRINCIPAL OFFICE

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

20163	NW	78 ct
Miami	FL	33015

ARTICLE III - SHARES

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

100

<u>ARTICLES IV - INITIAL REGISTERED AGENT AND STREET</u> <u>ADDRESS</u>

The name and address of the initial registered agent is:

Yulianela MartinEZ 20163 NW 78 CT Miami FL 33015

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SECRETARY OF STATE TALLAHASSEE. FLORIDA

ARTICLE V -- INCORPORATOR

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

Yulianela Martinez 20163 NW 78 CT Miami FL 33015 The undersigned incorporator has executed these Articles of Incorporation this ADRIL 201 b day of ignature ARTICLE VI- DIRECTOR (S)

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



<u>CERTIFICATE OF DESIGNATION OF REGISTERED AGENT</u> /<u>REGISTERED OFFICE</u>

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 forther 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.

gent Signaturo

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