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FLORIDA PROFIT/NON PROFIT CORPORATION
IMAX HEALTHCARE, INC.

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Articles of Incorporation
of
IMAX HEALTHCARE, INC.

Article I. Name

The name of this Florida corporation is:

IMAX HEALTHCARE, INC.

Article II. Mailing Address

The mailing address of the Corporation is:

IMAX HEALTHCARE, INC.
1427 CECILIA AVE.
CORAL GABLES, FL 33146

Article III. Principle Address

The principle address of the Corporation is:

IMAX HEALTHCARE, INC.
1427 CECILIA AVE.
CORAL GABLES, FL 33146

Article IV. Capital Stock

The Corporation shall have the authority to issue 100 shares of common stock, par value $1.00 per share.

Article V. Registered Agent

The name and address of the registered agent of the Corporation is:

RAUL MILIAN
1427 CECILIA AVE.
CORAL GABLES, FL 33146

Article VI. Board of Directors

The affairs of the Corporation shall be managed by a Board of Directors consisting of no less than one director. The number of directors may be increased or decreased from time to time in accordance with the Bylaws of the Corporation. The election of directors shall be done in accordance with the Bylaws. The directors shall be protected from liability to the fullest extent permitted by law. The name of each initial member of the Corporation's Board of Directors are:

President - Raul Milian - 1427 Cecilia Ave., Coral Gables, FL 33146

Prepared by:

Lester Barreras, C.P.A., P.A. - 1907 N.W. 88 Ct., Ste. 201, Doral, FL 33172
(305)477-1886

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Article VII.

The corporation shall have perpetual existence and may engage in any and all business permitted under the laws of the State of Florida and the United States.

Article VIII. Incorporator

The name and address of the incorporator is:

RAUL MILIAN
1427 CECILIA AVE.
CORAL GABLES, FL 33146

Article IX. Corporate Existence

The corporate existence of the Corporation shall be effective upon filing.

The authorized representative of the Incorporator executed the Articles of Incorporation on the 16th day of May of 2011.

By: ______________________
RAUL MILIAN
President

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TALLAHASSEE FLORIDA

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

CORPORATION:
IMAX HEALTHCARE, INC.

REGISTERED AGENT:
RAUL MILIAN
1427 CECILIA AVE.
CORAL GABLES, FL 33146

I agree to act as registered agent to accept service of process for the corporation named above at the place designated in this Certificate. I agree to comply with the provisions of all statutes relating to the proper and complete performance of the registered agent duties. I am familiar with and accept the obligations of the registered agent position.

By: ______________________
RAUL MILIAN
Registered Agent