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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
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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 EXCELLENCE HEALTHCARE, CORP.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

2018 OCT 5 AM 11:37
SECRETARY OF STATE
TALLAHASSEE, FL

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:Excellence Healthcare, Corp.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

15742 S.W. 100 Terr
Miami FL 33196**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Idania Hurtado Perez - PSECRETARY OF STATE
TALLAHASSEE, FL

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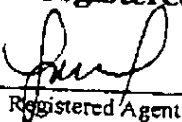
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Idania Hurtado Perez
15742 S.W. 100 Terr.
Miami FL 33196**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Idania Hurtado Perez
15742 S.W. 100 Terr.
Miami FL 33196

Required Signatures:

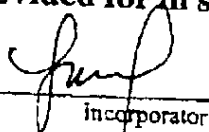
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Registered Agent10/05/18

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Incorporator10/05/18

Date**FILED**2018 OCT -5 AM 11:38
SECRETARY OF STATE
TALLAHASSEE, FL