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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I200000000019

Phone : (305)552-5973

Fax Number

: (305)675-5944

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

Email	Address:			

FLORIDA PROFIT/NON PROFIT CORPORATION **INSTACARE CALL CORP**

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME: The name of the corporation is:

INSTACARE CALL CORP	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is: 2130 VERDUN DR MIAMI BEACH FL 33141	2121 OCT 12
	F# 2
ARTICLE III SHARES: The number of shares of stock is: 100	· · · · · · · · · · · · · · · · · ·
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
<u> </u>	
LEAN DRO JOSETT BETANGOURT BETAN	- 20012T
ARTICLE V INITIAL REGISTERED AGENT AND STREET AD DRESS The name and Florida street address (PO Box not acceptable) of the registered age	
Leandro Josett Betancourt Betancour	
2130 verbun Dr Miami beach fl	<u>3</u> 314/
ARTICLE VI INCORPORATOR: The name and address of the Incorporate Legndro Josett Betancourt Betancourt 2130 verdun Dr Migmi beach F1 33	

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

Leandro Detancourt

Registered Agent

10/12/2/
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.

Leandro Between 10/12/2