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To:

Division of Corporations

Fax Number

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: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone

: (305)552-5973 Fax Number : (305)675-5944

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

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FLORIDA PROFIT/NON PROFIT CORPORATION USA GLOBAL MEDICAL CORP

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D. O'KEEFE JUN - 1 2022

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

| ARTICLE 1 NAME: The name of the corporation is: | |
|---|----------|
| USA Glabal Medical Corp | |
| ARTICLE II PRINCIPAL OFFICE: | - |
| The principal street address and mailing address is: | |
| 4951 SW 40th stree suite #= 200 Migmi, FL 33155 | |
| ARTICLE III SHARES: The number of shares of stock is: | |
| ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS | |
| Daniela Heredia Gonzalez (2) | 7 |
| ASS | F |
| | m |
| | <u> </u> |
| · | |
| | |
| ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: | |
| The name and Florida street address (PO Box not acceptable) of the registered agent is: | |
| 3453 Su) 89th ct Mianie FL 33115 | |
| Daniela Herodia Bungalez | |
| | |
| ARTICLE VI INCORPORATOR: The name and address of the Incomposition in | |
| ARTICLE VI INCORPORATOR: The name and address of the Incorporator is: | |
| 3453 Sw 89th of Might Fl 33116 | |
| 1 210 | |

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 Agent

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.

Incorporator

2022 MAY 31 PM 4: 31
SLUKE TARY OF STATE
TALL AHASSEE, FLORID