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04/27/95 08:15 FAS-T CORPORATE AGENTS (305) 592-9591 PAGE 001

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8405 NW 53RD ST
SUITE C-100
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CONTACT: LIDIA FERNANDEZ
PHONE: (305) 599-0839
FAX: (305) 592-9591

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DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
NAME: INTEGRATION HEALTH CARE SYSTEMS, INC.
FAX AUDIT NUMBER: H95000004713
CURRENT STATUS: REQUESTED
DATE REQUESTED: 04/27/1995
TIME REQUESTED: 08:52:50
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Articles of Incorporation
of
INTEGRATIONAL HEALTH CARE SYSTEMS, INC.

Article I. Name

The name of this Florida corporation is Integrational Health Care Systems, Inc. (the "Corporation")

Article II. Address

The mailing address of the Corporation is:

INTEGRATIONAL HEALTH CARE SYSTEMS, INC.
751 West 51 St.
Miami Beach, FL 33140

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Article III. Capital Stock

The Corporation shall have the authority to issue 500 shares of common stock, par value $1.00 per share.

Article IV. Registered Agent

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

Dr. Susan Solman
751 West 51 St.
Miami Beach, FL 33140

Article V. 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:

Dr. Susan Solman — President
751 West 51 St.
Miami Beach, Fl 33140

Prepared by: Rachlin & Associates, P.A.
11120 N.Kendall Drive
Suite 201
Miami, Fl 33176
(305) 270-2040

Article VI. Incorporator

The name and address of the incorporator is:

Dr. Susan Solman
751 West 51 St.
Miami Beach, FL 33140

Article VII. Corporate Existence

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

Article VIII. Purpose

The purpose of the Corporation is: Medical Practice

The authorized representative of the incorporator executed the Articles of Incorporation on April 26, 1995

By: _____

Dr. Susan Solman
President

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CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

CORPORATION:
INTEGRATIONAL HEALTH CARE SYSTEMS, INC.

REGISTERED AGENT:
Dr. Susan Solman
751 West 51 St.
Miami Beach, FL 33140

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: _____

Dr. Susan Solman
President

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