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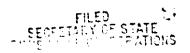
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ARTICLES OF INCORPORATION

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OF

HEALTHCARE CONSULTING, INC.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation

ARTICLE I: NAME

The name of the corporation shall be HEALTHCARE CONSULTING, INC

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be 9365 U S 19 North, Suite C. Pinellas Park, Florida, 34666

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time in one hundred (100) shares having a par value of one dollar (\$1 00) per share

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is John Picciano, 9365 U S 19 North, Suite C, Pinellas Park, Florida, 34666

ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is John Picciano, 9365 U.S. 19 North, Suite C, Pinellas Park, Florida, 34666

ARTICLE VI: INITIAL BOARD OF DIRECTORS

The names and addresses of the members of the initial Board of Directors and Officers of the corporation are as president, vice-president, secretary and treasurer, John Picciano, 9365 U.S. 19 North, Suite C. Pinellas Park, Florida, 34666

John Picciano

President

CERTIFICATE OF DESIGNATION

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REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607 0801, Florida Statutes, the mentioned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office registered agent in the State of Florida

- The name of the corporation is Healtheare Consulting Resources, Inc.
- The name and street address of the registered agent and office is John Piccianu 9365 U.S. 15 With Suite C Pincilns Ports, FL 34666

HAVING BEEN NAME AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Print Name