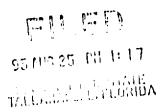
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LAZARUS CORPORATE	INDUSTRIES, INC.		
890 S.W. 87 AVENU	E, SUITE: 16		
(Aldiese) MIAME, FLOREDA 3	3174 (305)552-5973	Occide Hor ONLY	
(City, Sinte, Zip)	(Phone #)	OFFICE USE ONLY	<u></u>
LOCAL REPRESENTAT	IVE TALLAHASSEE		
(904)385-6715		≦ *4 11 103//. ↑ † † ↑	######################################
CORPORATION NAME	E(s) & DOCUMENTNUM	BER(S) (if known):	
1. TOCHMA	N MEDITOU	RS, INC.	
2.	n Namaj	(Wocument #)	
(Corporation	n Namo)	(Document #)	
3. (Corporation	n Nama)	(Document #)	<u> </u>
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(Comorado	n Nama)	(Document #)	\overline{m}
	ll wait Photocopy	Certified Copy	
Man out 1	ll wait Photocopy	Certificate of Status	S & S
NEW FILINGS	AMENDMENTS		ii S
Profit	Amendment		
NonProfit	Resignation of R.A., Officer	r/Director	
Limited Liability	Change of Registered Agen	t	
Domestication	Dissolution/Withdrawal		25
Other	Merger		RI II
	DECOMPONIA	8mc/25/95	
OTHER FILINGS	REGISTRATION/ QUALIFICATION	D110/05/43	
Annual Report	Foreign	P118/25/31	
Fictitious Name	Limited Partnership	!	
Name Reservation	Reinstatement		
	Trademark	[
	Other	Examiner's	Initials
CR2E031(10/92)			



ARTICLES OF INCORPORATION

OF

TUCHMAN MEDITOURS, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

TUCHMAN MEDITOURS, INC.

The principal place of business of this corporation shall be:

7270 N.W. 12 Street Suite 255 Miami, Fl 33126

ARTICLE II - NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III - CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:

FIVE HUNDRED SHARES with a \$1.00 par value.

ARTICLE IV - TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V - OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is (are):

Eddy Tuchman President/Treasurer c/o Glinsky 2655 Le Jeune Road #1111 Coral Gables, F1 33134

Aliza Tuchman Vice President/Secretary c/o Glinsky 2655 Le Jeune Road #1111 Coral Gables, FI 33134

ARTICLE VI - INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these articles of incorporation is (are):

Eddy Tuchman c/o Glinsky 2655 Le Jeune Road #1111 Coral Gables, Fl 33134

Aliza Tuchman c/o Glinsky 2655 Le Jeune Road #1111 Coral Gables, Fl 33134

	17:11		avijust	10 95	
Incorporation this	144-	day of _	angup -	<u>/, 19 47.</u>	\sim
			Ū	Signaturale	Angorporator(s)
				Signature 6, 0	theorporator(s)
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				s (ili	= 1 Welescan

STATE OF FLORIDA
COUNTY OF DICK.
THE FOREGOING Instrument was acknowledged and sworn to before me this 22.11 day of 2007, 1995, by 7 CCCC TOCH TOCH MACH
or lichman Medilours . Tix
(Name of Corporation)
(SEAL) My Continue of the comment of
Personally known OR Produced Identification Type of Identification produced Identification Identification number (if any)

CERTIFICATE DESIGNATION

95 MIG 25 PH 1: 17

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in domain the registered office/registered auent. In the State of Florida.

		•••	
1.	The name of the corporation is: Tuchman Meditou	<u>es, tnc.</u>	
2.	The name and address of the registered agent and c	office is:	
	MICHAEL GLINSKY		
	2665 LE JEUNE ROAD, SUITE #1111		
	CORAL GABLES, FLORIDA, 33134		1
			(Corporate officer)
		_	(Corporate officer)
		TITLE _	Besulent
		DATE_	8/22/95

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND IF FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF DECTION 607,325 FLORIDA STATUTES.

SIGNATURE (Registered Agent)

DATE 9/23/95