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08/28/95 11:1 FAS-T CORPORATE AGENTS (305) 592-9591 P. 001

8/28/95 FLORIDA DIVISION OF CORPORATIONS 10:20 AM
PUBLIC ACCESS SYSTEM
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TO: DIVISION OF CORPORATIONS
DEPARTMENT OF STATE
STATE OF FLORIDA
409 EAST GAINES STREET
TALLAHASSEE, FL 32399
FAX: (904) 922-4000

FROM: FAS-T CORP. AGENTS, INC.
8405 NW 53RD ST
SUITE C-100
MIAMI FL 33166-
CONTACT: LIDIA FERNANDEZ
PHONE: (305) 599-0839
FAX: (305) 592-9591

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DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
NAME: COMMUNITY HEALTH CARE GROUP CORP.
FAX AUDIT NUMBER: H95000009472
CURRENT STATUS: REQUESTED
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TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

OF

COMMUNITY HEALTH CARE GROUP CORP.

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: COMMUNITY HEALTH CARE GROUP CORP.

The principal place of business of this corporation shall be: 1180 S.W. 141th Ave. Miami, Fl 33184

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: 500 Shares $ 5.00 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):

Aidelyn Lopez 1180 S.W. 141st Ave. Miami, FL 33184

Prepared by: Aidelyn Lopez
1180 S.W. 141st Ave.
Miami, FL 33184
(305) 220-7991

H95000009472

ARTICLE VI INCORPORATOR(S)

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

Aidalyn Lopez
1180 S.W. 141st Ave.
Miami, FL 33184

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 28th day of August, 19 95

Signature(s) of Incorporator(s)

H95000009472

CERTIFICATE OF DESIGNATION
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 designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: COMMUNITY HEALTH CARE GROUP CORP.

2. The name and address of the registered agent and office is:

Aidelyn Lopez
(P.O. BOX NOT ACCEPTABLE)

1180 S.W. 141st Ave. Miami, Fl 33184
(CITY/STATE/ZIP)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SIGNATURE _____

TITLE Director

DATE 08/28/95

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 I 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 SECTION 607.325, FLORIDA STATUTES.

SIGNATURE _____

DATE 08/28/95

REGISTERED AGENT FILING FEE: