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Antonia O. Rodriguez
Requestor's Name
1344 W. 44 St.
Address
St. Louis, FL 33012
City State Zip Phone

CORPORATION(S) NAME

1st choice: Health Options, Inc. FL WA
2nd choice: Health Options of Miami, Inc.
3rd choice: Health Options of Dade, Inc.
4th choice: Health Options of South Florida, Inc.

- Profit
- NonProfit
- Foreign
- Limited Partnership
- Reinstatement
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TALLAHASSEE, FLORIDA

Handwritten signature and number: 460001

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96 JAN 24 PM 1:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

ARTICLE I

NAME

THE NAME OF THIS CORPORATION IS HEALTH OPTIONS OF MIAMI, INC.
and the mailing address is 1344 W. 44 St. Hialeah, Fl. 33012

ARTICLE II

DURATION

This corporation shall have a perpetual existence, unless dissolved according to law.

ARTICLE III

PURPOSE

This corporation is organized for the purpose of transacting any or all business for which corporation may be incorporated under the Florida General Corporation Act.

ARTICLE IV

CAPITAL STOCK

This corporation is authorized to issue One Thousand (1,000) shares of One Dollar (1.00) par value common stock, which shall be designated "COMMON SHARES."

ARTICLE V

INITIAL REGISTERED OFFICE & AGENT

The street address of the initial registered office of this corporation is 1344 W. 44 St. Hialeah, Fl. 33012, and the name of the initial registered agent of this corporation at that address is Antonia O. Rodriguez

ARTICLE VI
INITIAL BOARD OF DIRECTOR(S)

This corporation shall have (2) (two) Director(s) initially. The number of Director(s) may be either increased or decreased from time to time by the By-Laws, but shall never be less than one. The name(s) and address(es) of the initial Director(s) of this corporation is/are:

Antonia O. Rodriguez
1344 W. 44 St. Hialeah, Fl. 33012

Sol Nelson
1344 W. 44 St. Hialeah, Fl. 33012

ARTICLE VII
INDEMNIFICATION

To the full extent permitted by law, the corporation shall indemnify each person made or threatened to be made a party to any threatened, pending or completed action, suit, or proceeding, whether civil, criminal, administrative or investigative (including, one in the right of the corporation to procure a judgment in its favor) by reason of the fact that her or his testator or intestate, is or was a director, officer, employee or agent of the corporation or served any other corporation, partnership, joint venture, trust, or other enterprise in any capacity, at the request of the corporation.

ARTICLE VIII
OFFICERS

The officers of this corporation shall be as follows:

Antonia O. Rodriguez	President & Treasurer
Sol Nelson	Vice President & Secretary

ARTICLE IX
INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is/are as follows:

Antonia O. Rodriguez
1344 W. 44 St. Hialeah, Fl. 33012

Sol Nelson
1344 W. 44 St. Hialeah, Fl. 33012

The undersigned incorporator(s) has/have executed these Articles of Incorporation on this January 19th, 1996

Antonia O. Rodriguez
Sol Nelson

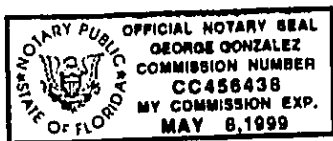
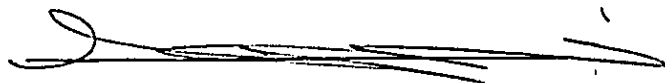
STATE OF FLORIDA)

COUNTY OF DADE)

BEFORE ME, notary public authorized to take acknowledgments in the state and county set forth above personally appeared Antonia O. Rodriguez known to me and known by me to be the person who executed the foregoing Articles of Incorporation, and he/she acknowledged before me that he/she executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the state and county aforesaid this January 19th, 1996

My commission expires:



CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE
SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM
PROCESS MAY BE SERVED.

In pursuance of Chapter 48.091 Florida Statute, the following is
submitted, in compliance with said Act:

First -- That **HEALTH OPTIONS OF MIAMI, INC.**
is desiring to organize under the laws of the State of Florida with
its principal office at 1344 W. 44 St. Hialeah, Fl. 33012, has
named Antonia O. Rodriguez located at 1344 W. 44 St. Hialeah, Fl.
33012, as its agent to accept service of process within this state.

Having been named to accept service of process of the above
stated corporation, at the place designated in this certificate, I
hereby accept to act in this capacity, and agree to comply with the
provision of said Act relative to keeping open said office.

By:

Antonia O. Rodriguez

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TALLAHASSEE, FLORIDA