P9600094101 TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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		rofessionals, Inc. name - must include su		
Enclosed is an origina for : \$70.00 Filing Fee	I and one (1) co	py of the articles of \$122.50 Filling Fee & Certified Copy Additional Cop	* \$131.25 Filing Fee, Certified Copy & Certificate	ind a check
FROM: Carlos Fernando Giron Name (printed or typed)				
	3430 S.W	Address		
	Miami, F Cit	ı, 33165 y, State & Zip		·
		2-0632 Telephone number		

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Medical Eligibility Professionals Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3430 S.W. 108 Avenue - Miami, FL 33165

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 (additional stock structure information included on the next page under Article III.)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Carlos Fernando Giron 3430 S.W. 108 Avenue Miami, FL 33165

Article III (additional structure information)

Upon any increased issue of stock, the stockholders shall have the pro rata preferential right to subscribe therefor at such price and on such terms as the Board of Directors may, in each instance, fix,

None of the Stockholder's shares can be sold, pledged, or encumbered by any of the individual Stockholders unless it first be offered to the other Stockholders in proportion to the number of shares held by them at then market value., by giving the other Stockholders notice in writing of intention to sell, after which notice the other Stockholders shall have thirty (30) days within which to either accept or reject the offer.

In the event of acceptance, a closing date and place shall be fixed within ten (10) days after acceptance for the transfer of the selling Stockholder's stock and the delivery of the price therefor. Such stock shall be delivered free and clear of all liens, encumbrances or restrictions.

Nothing herein contained shall restrict the free transfer of the shares of stock of any shareholders to and from their respective spouses.

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Carlos Fernando Giron 3430 S.W. 108 Avenue Miami, FL 33165

50 shares- Common Stock

Lissotte Barbara Giron 3430 S.W. 108 Avenue Miami, FL 33165

50 shares- Common Stock

The undersigned incorporator(s) has(have) executed these Articles of Incorporation the	his
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15th day of May , 19 96 .

(An additional article must be added if an effective date is requested.)

Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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:		Medical Eligibility Professionals Inc.		
	. -			
2.	The name and address of the registe	red agent and office is:		
	Carlos F	ernando Giron (NAME)		
		r. 108 Avenue or Mail Drop Box NOT ACCEPTABLE)		
	Miami, F	L 33165 (City/State/Zip)		

Having been named 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.

May 15, 1996
(SIGNATURE) (DATE)