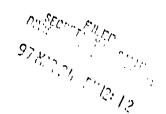
PANSMITTAL LETTER



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

000002121700--5 -03/24/97--01008--025 *****490.00 *****122.50

| Tallahassee, FL 32314 | | | ****490.00 *****122 | | |
|--|--|---|---|--|--|
| SUBJECT: | | ARE GROUP nte name - must include suff | | | |
| Enclosed is an o | riginal and one(1) copy of the article | s of incorporation and a c | heck for : | | |
| ☐ \$70.0 Filing Fe | | Filing Fee & Certified Copy | Signature \$131.25 Filing Fee, Certified Copy & Certificate | | |
| | | ADDITIONAL COI | PY REQUIRED | | |
| FROM: | KARL BROWN | いい or typed) | | | |
| , | 300 W. C | | PEET | | |
| OR) ANDO FLORIDA 32801 City, State & Zip | | | | | |
| (407) 841-8933 Daytime Telephone number | | | | | |
| | | | 767 - 107 Mile 24 / 19 / 11 | | |

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

ARTICLES OF INCORPORATION

13/10 - 5/1/2 07/13/21 - 1/2/2

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

> ARTICLE I NAME

The name of the corporation shall be:

PARADISE CARE GROUP, INC

ARTICLE II PRINCIPAL OFFICE

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

300 W. CHURCH STREET

ORLANDO FLORIDA 33801

ARTICLE III SHARES

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

20 Million

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

KARL BROWN

300 W. CHURCH STREET ORLANDO FLORIDA 32801

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):

KARL BROWN

300 W. CHURCH STREET

OPLANDO FLORIDA 32801

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

24 day of MARCH, 19 97.

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

Kay Brown 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: | PARADISE | CARE | GROUP, INC | | |
|--|--|---------------|------------|--|--|
| 2. The name and address of the registered agent and office is: | | | | | |
| KARL | BROWN (NAME) | | | | |
| 300 L | W. CHURCH OX OF Mail Drop Box NOT ACCEPT | STREET TABLE) | | | |
| OPL AN | JOO FLORIDA | 32801 | | | |

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.

Karl Bron 3/24/97
(SIGNATURE) (DATE)