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To:

Division of Corporations

Fax Mimber

: (850)922-4001

From:

Account Name : ACE INDUSTRIES, INC.

Account Number : 070744001530 Phone

: (305)358-2571

Fax Number

: (305)358-7832

FLORIDA PROFIT CORPORATION OR P.A.

ALTERNATIVE HEALTH RESOURCES, INC.

Certificate of Status	0
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ARTICLES OF INCORPORATION

Article 1: Name of Corporation: ALTERNATIVE HEALTH RESOURCES, INC.

South to the State of the State

Address of Corporation: 950 NORTHWEST 185th AVENUE

PEMBROKE PINES, FL 33029

- Article 2: CAPITAL STOCK: The number of shares which the corporation has authorized to be outstanding at any one time is 100 _____, with a par value of _____. (PAR VALUE IS NOT REQUIRED).
- Article 3: REGISTERED AGENT: LUCIA N. ZITMAN

REGISTERED OFFICE: 950 NORTHWEST 185th AVENUE

PEMBROKE PINES, FL 33029

* I am familiar with and hereby accept the duties and responsibilities as Registered Agent for said corporation.

Lucia N. Zitman

Signature of Registered Agent

- Article 4: The Board of Directors are: (Board of Directors is NOT REQUIRED). First listed is President, second is Vice President, then Secretary/Treasurer.
 - 1. LUCIA N. ZITMAN, 950 NORTHWEST 185th AVENUE, PEMBROKE PINES, FL 33029
 - 2. DENISE DIAZ, 27 DAVIS ROAD, WEST MILLBURY, MA 01527
 - 3. LUCIA N. ZITMAN, 950 NORTHWEST 185th AVENUE, PEMBROKE PINES, FL 33029

Article 5: The NAME and ADDRESS of the INCORPORATOR is:

LUCIA N. ZITMAN

950 NORTHWEST 185th AVENUE

PEMBROKE PINES, FL 33029

In witness whereof, I have subscribed my name:

Lucia N. Gitner

Signature of Incorporator

H99-5763

Prepared by: Ace Industries, Inc., 54 NW 11th Street, Miaml, FL 33136, (305) 358-2571