

P03000097420

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

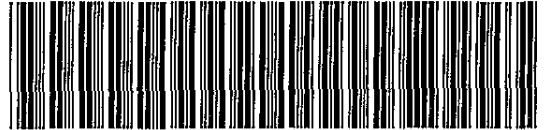
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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TRANSMITTAL LETTER

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

SUBJECT: _____
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee
 \$78.75 - Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy
 \$87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: YVIKA Arre
Name (Printed or typed)

850 N.E. 178th Tr.
Address

Miami, FL 33162
City, State & Zip

(305) 303 - 2039
Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Nursing One Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

850 N.E. 178th Tr.
Miami, Fl. 33162

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any & all lawful business

ARTICLE IV SHARES

The number of shares of stock is: 20 (twenty)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

President
Yvika Arrc
850 N.E. 178th Tr.
Miami, Fl. 33162

Vice-President
Jean Rikerson Louis

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

YVIKA Arrc
850 N.E. 178th Tr.
Miami, Fl. 33162

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

YVIKA Arrc
850 N.E. 178th Tr.
Miami, Fl. 33162

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Yvika Arrc
Signature/Registered Agent

Date

Yvika Arrc
Signature/Incorporator

Date