

# P05000083547

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 205-0381

From: Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305) 599-0839  
Fax Number : (305) 716-0346

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 JUN -9 AM 9:06

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## FLORIDA PROFIT CORPORATION OR P.A.

### MICHAEL HOME CARE, INC.

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
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| Page Count            | 03      |
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**ARTICLES OF INCORPORATION  
OF  
MICHAEL HOME CARE, INC.**

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

**ARTICLE I-NAME**

The name of corporation shall be: **MICHAEL HOME CARE, INC**

The principal place of business of this corporation shall be:

**10603 SW 161 PL  
MIAMI, FL 33196**

**ARTICLE II- NATURE OF BUSINESS**

The corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United State of America, or any other state, country, territory or nation.

**ARTICLE III-CAPITAL STOCK**

The maximum number of shares with this Corporation is authorized to have outstanding at any time is 1000 shares of common stock having no par value.

**ARTICLE IV-TERM OF EXISTENCE**

This corporation is to exist perpetually.

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**ARTICLE V-INITIAL BOARD OF DIRECTORS**

The initial Board of Directors shall consist of one member(s).

The numbers of directors may be increased from time to time by vote of the Board of Directors, but in no case shall the number of directors be less than one nor more than 15.

The name(s) and address(es) of the director(s) constituting the initial Board of Directors is/are:

| <u>Name</u>        | <u>Address</u>                     |
|--------------------|------------------------------------|
| JOSE M. BETANCOURT | 10603 SW 161 PL<br>MIAMI, FL 33196 |

**ARTICLE VI- INCORPORATOR(S)**

The name(s) and address(es) of the Incorporator is/are:

| <u>Name</u>        | <u>Address</u>                     |
|--------------------|------------------------------------|
| JOSE M. BETANCOURT | 10603 SW 161 PL<br>MIAMI, FL 33196 |

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Incorporator

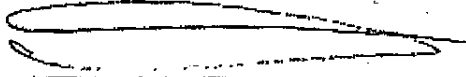
**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICER**

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under laws of the State of Florida, submits the following statement in designating the registered officer/registered agent in the State of Florida.

1. The name of the corporation is: **MICHAEL HOME CARE , INC**
2. The name and address of the registered agent and officer is :

**JOSE M. BETANCOURT  
10603 SW 161 PL  
MIAMI, FL 33196**

**HAVING BEEN NAMED AS REGISTERED AGENT AND ACCEPT SERVICE  
OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE  
DESIGNATED, AS REGISTERED AGENT 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.**

  
\_\_\_\_\_  
Signature  
6/9/05  
\_\_\_\_\_  
Date

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