

PO9000015189

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

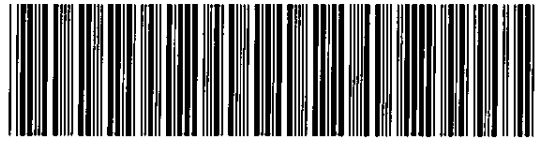
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600143546036

02/17/09--01017--013 \*\*78.75

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

NOT INTENDED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

2009 FEB 17 AM 10:58

FILED

09 FEB 17 AM 9:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. McKnight FEB 18 2009

# LAZARUS

## CORPORATE FILING SERVICE

3320 SW 87<sup>TH</sup> AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. DIYOR HOME CARE SERVICE, INC  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in       Pick up time 2.00       Certified Copy  
 Mail out       Will wait       Photocopy       Certificate of Status

### NEW FILINGS

- Profit  
 Not for Profit  
 Limited Liability  
 Domestication  
 Other

### AMENDMENTS

- Amendment  
 Resignation of R.A., Officer/Director  
 Change of Registered Agent  
 Dissolution/Withdrawal  
 Merger

### OTHER FILINGS

- Annual Report  
 Fictitious Name

### REGISTRATION/QUALIFICATION

- Foreign  
 Limited Partnership  
 Reinstatement  
 Trademark  
 Other

Examiner's Initials

**ARTICLES OF INCORPORATION**

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:

*Diyor Home Care Service, Inc*

ARTICLE II - PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING OF THIS CORPORATION SHALL BE:

*900 W 49 St Suite # 510  
Hialeach Fla 33012*

CLERK OF STATE  
TALLAHASSEE, FLORIDA

09 FEB 17 AM 9:14

FILED

ARTICLE III - SHARES

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

*100*

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS

*Orlando F Machado  
900 W 49 St Suite # 510  
Hialeach Fla 33012*

ARTICLE V - INCORPORATOR

THE NAME AND STREET ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION IS:

ORLANDO F MACHADO  
900 W 49 ST SUITE # 510  
HALEACH FLA 33012

THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE ARTICLES

16 OF INCORPORATION THIS  
DAY OF FEBRUARY, 2009



SIGNATURE

ARTICLE VI - DIRECTOR(S)

THE NAME(S) AND STREET ADDRESS (ES) OF THE DIRECTOR(S) TO THESE ARTICLES OF INCORPORATION IS (ARE):

ORLANDO F MACHADO (PRESIDENT)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT 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 RELATED TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.



REGISTERED AGENT SIGNATURE

CLERK OF STATE  
TALLAHASSEE, FLORIDA

09 FEB 17 AM 9:15

FILED