

Charter Number Only

5/2/97
P9700048701

Mindy Kraut
Requestor's Name
8360 W. Oakland Park Blvd #317
Address
SUNRISE, FL 33351
City State ZIP Phone

NOTATION ONLY

New Address as of 4/2/97 954.5727969
1888 - A NICH UNIVERSITY DR
PLANTATION, FL 33322

CORPORATION(S) NAME

Absolute Health Care, Inc. 700002195847-

-05/30/97--01014--034
****122.50 ****122.

<input checked="" type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> NonProfit	<input type="checkbox"/> Dissolution	<input type="checkbox"/> Mark
<input type="checkbox"/> Foreign	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Reservation	<input type="checkbox"/> Change of Registered Agent
<input type="checkbox"/> Reinstatement	<input type="checkbox"/> Photo Copies	<input type="checkbox"/> Certificate Under Seal
<input checked="" type="checkbox"/> Certified Copy	<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input checked="" type="checkbox"/> Wait In	<input type="checkbox"/> Will Wait	<input type="checkbox"/> After 4:30
<input type="checkbox"/> Wait In	<input type="checkbox"/> Will Wait	<input type="checkbox"/> Mail Out

FILED
97 JUN -3 PM 11:58
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Empire Toll Free: 1-800-432-3028

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

CERTIFIED COPY

W97-12095
K.R. MAY 30 1997

DIVISION OF CORPORATION



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

May 30, 1997

EMPIRE

TALLAHASSEE, FL

SUBJECT: ABSOLUTE HEALTH CARE, INC.
Ref. Number: W97000012685

We have received your document for ABSOLUTE HEALTH CARE, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Only one person may be listed as registered agent at a time. Please correct article IV to show only one person.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6932.

Kimberly Rolfe
Document Specialist

Letter Number: 897A00029377

RECEIVED
97 JUN -3 AM 9:57
DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION
OF
ABSOLUTE HEALTH CARE, INC.

SECRETARY OF STATE
TALLAHASSEE FLORIDA

97 JUN -3 PM 11:59

FILED

BY THESE ARTICLES OF INCORPORATION, the undersigned acting as incorporated pursuant to the Florida General Corporation Act, forms a corporation for profit.

ARTICLE I

The name of this corporation shall be ABSOLUTE HEALTH CARE, INC.

ARTICLE II

This corporation shall have its principal office at 1380 NE Miami Gardens Drive, Suite 215, North Miami Beach, Florida 33179.

ARTICLE III

The corporation shall have perpetual existence unless sooner dissolved according to law.

ARTICLE IV

The purpose of this corporation is to transact any and all lawful business for which corporations may be incorporated under Chapter 607 of the Florida Statutes.

ARTICLE V

The aggregate number of shares of stock that this corporation shall have the authority to issue is 100 shares of common stock at a par value of \$1.00.

ARTICLE VI

Every stockholder, upon the sale for cash or a new stock of this corporation, shall have the right to purchase his/her prorata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VII

The initial registered agent for this corporation are SABINA SMEJKAL and the initial registered office is located at 1380 NE Miami Gardens Drive, Suite 215, North Miami Beach, Florida 33179.

ARTICLE VIII

This corporation shall have a minimum of one (1) and a maximum of four (4) Directors constituting the Initial Board of Directors. The number of Directors may be either increased or decreased from time to time in accordance with the By-Laws but shall never be less than one (1). The name and address of each member of the initial Board of Directors of this Corporation is:

SABINA SMEJKAL	9139 D SW 20th Street Boca Raton, Florida 33428
LEE WEINGARDEN	7506 Sierra Drive East Boca Raton, Florida 33433

ARTICLE IX

The name and street address of each Incorporator is as follows:

SABINA SMEJKAL	9139 D SW 20th Street Boca Raton, Florida 33428
LEE WEINGARDEN	7506 Sierra Drive East Boca Raton, Florida 33433

ARTICLE X

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

ARTICLE XI

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the stockholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned Incorporators have executed these ARTICLES OF INCORPORATION this 27th day of May, 1997.

Sabina Smejkal

SABINA SMEJKAL
Lee Weingarden

LEE WEINGARDEN

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

In compliance with Section 48.091 of the Florida Statutes the following is submitted:

That ABSOLUTE HEALTH CARE, INC., desiring to organize under the laws of the State of Florida, with its principal office, as indicated in the Articles of Incorporation, at 1380 NE Miami Gardens Drive, Suite 215, City of North Miami Beach, County of Dade, State of Florida, has named SABINA SMEJKAL, located at 1380 NE Miami Beach, City of Miami, County of Dade, State of Florida, as its agent to accept service of process within this state.

ACKNOWLEDGMENT:

Having been named to accept service of process for the above-named Corporation, at the place designated in this certificate, the undersigned agrees to act in this capacity, and agrees to comply with the provisions of Florida law relative to keeping the designated office open.

BY: *Sabina Smejkal*

SABINA SMEJKAL, Registered Agent

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97 JUN -3 PM 11:59
SECRETARY OF STATE
TALLAHASSEE FLORIDA