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SECRETARY OF STATE

7 JUL -5 PM 4:2

1/4

COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: RESPEARE INC				
(Name of corporation - must include suffix)				
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida. ALSO \$300 FOR PENALTIES FOR JOOS + 9066				
Please return all correspondence concerning this matter to the following:				
AllAN M. LERNER, ESD				
(Name of Person)				
AllAN M. LERNER, ESQ (Name of Person) LAW OFFICES OF AllAN LERNER, P.A. (Firm/Company)				
(Firm/Company)				
1888 EAST OAKLAND PARK BOUKEVARD (Address)				
FORT LAUSERBALE FL 33306				
(City/State and Zip code)				
For further information concerning this matter, please call:				
JOHNNE LERNER # (954) 568 - 8111				
(Name of Person) at (954) 563 - 8111 (Area Code & Daytime Telephone Number)				
STREET/COURIER ADDRESS: MAILING ADDRESS:				
New Filing Section New Filing Section Division of Corporations Division of Corporations				
Clifton Building P.O. Box 6327				
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301				
Enclosed is a check for the following amount:				
\$70.00 Filing Fee \$78.75 Filing Fee & S78.75 Filing Fee & Certificate of Status Certified Copy \$87.50 Filing Fee, Certified Copy				

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607 1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

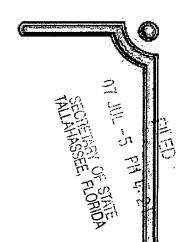
1. Respuare	, mc.		
	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	o," "COMPANY," "CORPORATION,"	
Resp	care-One, Inc	•	
-	able in Florida, enter alternate corporate name	e adopted for the purpose of transacting business in	Florida)
_{2.} Nevada	3	76-0776901	
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)	
4. 12/30/04	5	Perpetual	
(Date	of incorporation)	(Duration: Year corp will cease to exist or "per	petual") 07 J
e mux	(Date first transacted husiness	in Florida, if prior to registration)	量
		1502, F S, to determine penalty liability)	75 -25 -5
, 6601 Lyon	s Road # B1, Coconut Cree	k, FL 33073	PH PH
	(Principal office ad-	dress)	ESI H
Same			4: 2.1 STATE 1.0918
	(Current mailing ad	dress)	
Madical pr	raduate and other husiness I	legal to the state of Florida	
	oducts and other business of corporation authorized in home state or co		
, , ,	t address of Florida registered agent: (P.		
Name:	Allan M. Lerner		
Office Address:	2888 East Oakland Park B	oulevard	
Office Hadress.	Fort Lauderdale	, Florida 33306	
	(City)	(Zip code)	
10 Registered as	ent's acceptance:		
Having been nam	ed as registered agent and to accept serv	ice of process for the above stated corporation	
		ment as registered agent and agree to act in to relative to the proper and complete performar	
	with and accept the obligations of my po		ice of my unites,
	(my Same		
\subset	(Registered agent's signature)	

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:	Eir
A. DIRECTORS	OZ W
Chairman: N/A	FILED 07 JUL -5 PH 4:21
Address:	SECRETARY OF STATE TALLAHASSEE, FLORIDA
	TALLAHASSEE, FLORIDA
Vice Chairman: N/A	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Shara Hernandez	
Address: 6601 Lyons Road #B1	
Coconut Creek, FL 33073	
Vice President:	
Address:	
Secretary: Bruce Sher	
Address: 6601 Lyons Road, #B1, Coconut Creek, Fl	L 33073
Treasurer:	
Address:	
7	
NOTE: If necessary, you may attach an addendum to the application lis	ting additional officers and/or directors.
13. Envershel	
(Signature of Director or Officer listed in number	
14. Druce Sher Secre	
(Typed or printed name and capacity of person s	agung appucation)

SECRETARY OF STATE





CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, RESPCARE, INC., as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 30, 2004, and is in good standing in this state.

COTAL

Electronic Certificate
Certificate Number: C20070628-2248
You may verify this electronic certificate
online at http://secretaryofstate.biz/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on June 28, 2007.

ROSS MILLER Secretary of State