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TRANSMITTAL LETTER

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 JUN 26 AM 8:28

FILED

SUBJECT:

HOME CARE PROVIDERS, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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:

RAMON T. NUGUIO

Name (Printed or typed)

700003281977--6

06/08/00--01082--021

*****78.75 *****78.75

15661 SW 85 TERRACE #224

Address

MIAMI, FL 33193

City, State & Zip

305-386-0374

Daytime Telephone number

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

JUN 28 2000



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

June 15, 2000

RAMON T. NUGUID
15661 SW 85 TERRACE #224
MIAMI, FL 33193

SUBJECT: HOME CARE PROVIDERS, INC.
Ref. Number: W00000015208

We have received your document for HOME CARE PROVIDERS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of 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 (850) 487-6928.

Tim Burch
Document Specialist

Letter Number: 800A00034206

ARTICLES OF INCORPORATION
OF
QUALITY CARE MANAGEMENT SYSTEMS, INC.

FILED
00 JUN 26 AM 8:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a corporation under the laws of the State of Florida, do hereby adopt the following Articles of Incorporation.

ARTICLE I. NAME

The name of the corporation shall be: **Quality Care Management Systems, Inc.**

ARTICLE II. PURPOSE

The general nature of the business to be transacted by the corporation shall be any lawful purpose, including but not limited to the following:

- A. To operate a business offering custodial and caretaker services such as companion, homemaker, and sitter to clients.
- B. To finance the purchase of goods belonging or to be acquired by this corporation or any other person, firm or corporation.
- C. To manufacture, purchase or otherwise acquire, own mortgage, pledge, sell, assign and transfer or otherwise dispose of, to invest, trade, deal in and with goods, wares, merchandise of every class and description.
- D. To acquire and pay for in cash, stock or bonds of this corporation, or otherwise, the goodwill, rights, assets and property, and to undertake or assume the whole or any part of the obligation or liabilities of any person, firm, association or corporation.

ARTICLE III. OFFICES

The principal office of the corporation shall be located at: 15661 SW 85 Terrace #224 in the city of Miami, county of Miami-Dade, State of Florida.

ARTICLE IV. STOCKS:

The maximum number of shares that the corporation is authorized to have outstanding at any time shall be 500 shares of par value of One Dollar (\$1.00) per share, all of which shall be common stock of the same class.

ARTICLE V. DIRECTORS/OFFICERS

The number of directors for this corporation shall be not less than one (1) nor more than seven (7).

The name(s) and post office addresses of the members of the first Board of Director(s) who, subject to the provisions of the by-laws and these articles of incorporation, shall hold office for the first year of the corporation's existence or until their successors are elected and have qualified, are as follows:

Ramon T. Nuguid President/Director
15661 SW 85 Terrace #224 Miami, Florida 33193

Judith M. Nuguid Vice President/Secretary/Director
15661 SW 85 Terrace #224 Miami, Florida 33193

ARTICLE VI. REGISTERED AGENT

The initial registered agent shall be Ramon T. Nuguid at: 15661 SW 85 Terrace #224 Miami, Florida 33193

ARTICLE VII. INCORPORATOR

The incorporator shall be Ramon T. Nuguid at: 15661 SW 85 Terrace
#224 Miami, Florida 33193

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.

Samuel Hunt
Signature / Registered Agent

6-22-00

Date

Samuel K. Kim
Signature/ Incorporator

6-22-00

Date

ARTICLE VIII. BY-LAWS.

The power to adapt, after, amend or appeal by-laws shall be vested in the Board of directors and in the shareholders.

IN WITNESS WHEREOF the parties have hereunto made, subscribed and acknowledged this Certificate of Incorporation.

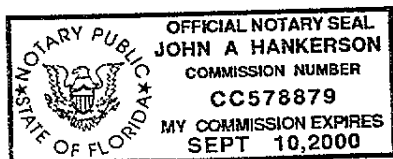
_____(SEAL)

STATE OF FLORIDA)
)
COUNTY OF DADE)

I HEREBY CERTIFY that this day personally appeared Ramon Nuguid, to me well known to be the person described in and who executed the foregoing Certificate of Incorporation and he acknowledges the said Certificate to be the act and deed of the signer and that the facts therein set forth are true.

WITNESS my hand and official seal at 10201 Hammocks Blvd. Ste. 153 said county and State
this 1st day of June 2000.

POSTAL & PARCEL ETC. INC.
10201 Hammocks Blvd. Ste. 153
Miami, Florida 33196
Tel: (305) 382-7009



John A. Hankerson
NOTARY PUBLIC
STATE OF FLORIDA AT LARGE

My Commission Expires: 09/10/2000