P000000 72249 Requester's Name

MARLENE D. HUNTER A.L.F. CONSULTANT, INC.

1000 East Atlantic Blvd. Suite 205N Pompano Beach, FL. 33060

2700003337243 1 27720.70 01000 072 0ffice Use*###*78.75 *****78.75

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

1(Corporation Name) 2.	(Document #)
(Corporation Name)	(Document#) 300003337,2431 -07/26/0001093003 *****78,75 *****78,75
(Corporation Name) 4(Corporation Name)	(Document #) (Document #) (Document #) (Document #) (Document #)
☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait	Certified Copy, 97 22 32 Photocopy Photocopy Certificate of Party 23 32 Photocopy
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 F. CHESSEN JUL 2 8 2000

Examiner's Initials

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I QUALITY HOME CARE MANAGEMENT, INC. The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

305 East Orange Street Altamonte Springs, Fla. 327

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide qualified health care personnel (nurses, nursing assistants, home health aides, homemakers & companions) to patients and health care facilities.

ARTICLE IV SHARES

The number of shares of stock is:

Five Thousand(5,000) have par value of

one dollar(\$1.00) per share.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Norma Cole- President 305 East Orange Street

Altamonte Springs, Fla. 32701

REGISTERED AGENT

The name and Florida street address of the registered agent is:

Norma Cole

305 East Orange Street

Altamonte Springs, Fla. 32701

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Thomas Hunter

1000 East Atlantic Blvd. Suite 205N

Pompano Beach, Fla. 33060

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

Signature/Registered Agent

Date 17/10 Date 17-14-200)