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CORAL GABLES, FLORIDA 33134
(City, State, Zip)

(305) 444-4994
(Phone#)

(305) 444-4977
(FAX#)

OFFICE USE ONLY

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

1. MGM Home Health Care, INC.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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☐ Certificate of Status

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TALLAHASSEE FLORIDA

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NEW FILINGS	
☒	Profit
☐	NonProfit
☐	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
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

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

Examiner's Initials

ARTICLES OF INCORPORATION
FOR
MGM HOME HEALTH CARE, INC.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

MGM HOME HEALTH CARE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1490 W. 49th PL. #440
HIALEAH, FL 33012

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have shall be:

SHARES: 100 @ \$1.00

ARTICLE IV REGISTERED AGENT

The name and Florida street address of the initial registered agent shall be:

GISELLE G. FAJARDO
1490 W. 49th PL. #440
HIALEAH, FL 33012

ARTICLE V INCORPORATOR

The name(s) and address(es) of the incorporator(s) to these Articles of Incorporation are:

GISELLE G. FAJARDO
1490 W. 49th PL. #440
HIALEAH, FL 33012

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TALLAHASSEE FLORIDA

Giselle C Fajardo
Signature of Incorporator

8-8-00
Date

ARTICLE VI DIRECTOR(S)/OFFICER(S)

The name(s) and address(es) of the director(s)/officer(s) to these Articles of Incorporation are:

GISELLE G. FAJARDO (P)
1490 W. 49th PL. #440
HIALEAH, FL 33012

Having been named as registered and to accept service of process for the above started corporation at the 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Giselle C Fajardo
Signature of Registered Agent

8-8-00
Date

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