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TONY T JONES
1827 46TH AVE NORTH
ST.PETERSBURG, Florida 33713

FILED
00 SEP 18 AM 11:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 23, 2000

Secretary of State
Corporation Division
Executive Towers
Tallahassee, FL 32304

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-09/18/00-01079-019
*****78.75 *****78.75

Dear Sir or Madam:

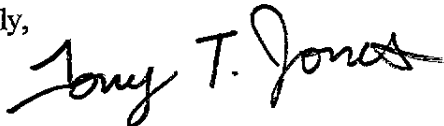
I plan to incorporate a business in Florida. I have enclosed a check to cover the cost/fees required to reserve a corporate name.

The following are my first, second, and third choices for the corporate name:

- 1. MILLENNIUM Home & Mobile Healthcare SERVICES, INC.
 - 2. MILLENNIUM HOME HEALTHCARE SERVICES, INC.
- First choice: _____
 Second choice: _____
 Third choice: _____

If all of these names are unavailable, please notify me at the address above. Thank you for your assistance in this matter.

Sincerely,



TONY T JONES

727-522-9786



**Articles of Incorporation
of
MILLENNIUM HOME HEALTHCARE SERVICES, INC.**

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**I.
Name**

The name of the Corporation is MILLENNIUM HOMEHEALTHCARE SERVICES, INC., hereinafter referred to as the "Corporation."

**II.
Purposes**

The purpose of the Corporation is to transact any and all lawful business for which corporations may be incorporated under the laws of the State of Florida, as they may be amended from time to time.

**III.
Principal Office and Registered Agent**

The principal office of the Corporation is 1827 46TH AVE NORTH, ST.PETERSBURG, Florida 33714. The Corporation may maintain offices and/or transact business at other locations, either within or without the State of Florida. The name and address of the registered agent for service of process upon the Corporation is TONY L. JONES, 1827 46TH AVE NORTH, ST.PETERSBURG, Florida 33714.

**IV.
Duration**

The duration of the Corporation shall be perpetual.

**V.
Initial Business**

The initial business of the Corporation shall be: Home Healthcare Services

VI.
Capital Stock

The Corporation is authorized to issue only one class of shares of stock which shall be designated Common Stock. The total number of shares the Corporation shall have authority to issue is 1000, each share to have a par value of \$ 1.00.

VII.
Incorporators

The names and mailing addresses of the incorporators are:

<u>Incorporator Name</u>	<u>Incorporator Address</u>
Tony T. Jones	1827 46 th Ave No., St. Petersburg, FL 33713

VIII.
Directors

The number of directors constituting the initial Board of Directors of the Corporation is: 1. The name(s) and address(es) of the person(s) who is/are appointed to act as the initial director(s) of the Corporation is/are:

<u>Director Name</u>	<u>Director Address</u>
Tony T. Jones	1827 46 th Ave North., St. Petersburg, FL 33713

IX.
No Personal Liability

The private property of the stockholders shall not be subject to the payment of corporate debts.

X.
Operating Provisions

The provisions for the operation, regulations, and management of the business and internal affairs of the Corporation shall be as set forth in the Bylaws, which may be amended from time to time by a majority vote of a quorum of the Board of Directors.

XI.
Fiscal Year

The fiscal year of the Corporation shall be from Jan _____ to
Dec _____ of each year.

IN WITNESS WHEREOF, we have hereunto set our hands and seals on this, the _____
day of _____, 2000 _____.

Incorporator Tony T. Jones

Having been named as registered agent and to accept service of process for the above stated corporation at the designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity.

Tony T. Jones
Register Agent

State of Florida

County of Pinellas

BEFORE ME, the undersigned authority, on this day personally appeared Tony Jones, known to me to be the person described in, and whose name is subscribed to the foregoing document, who on oath stated to me that he/she executed the same for the purposes and consideration therein expressed.

SUBSCRIBED AND SWORN TO BEFORE ME this the 24 day of August, 2000.

Julie A Williams
Notary Public in and for the
State of Florida

My Commission Expires:



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TALLAHASSEE, FLORIDA

State of Florida

County of Pinellas

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Julie A Williams
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My Commission Expires:

