Department of State Division of Corporation P. O. Box 6327 Tallahassee, FL 3231		TAL LETTER	77 SECRETARY OF STATE TALLAHASSEE. FLORIDA	95 FILED FILED
SUBJECT: AI	DVANTAGE HOME CARE (PROPOSED CORPORAT	TNC TE NAME – <u>MUST INCL</u> I	20000348)01105013
Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a	check for:	
□ \$70.00 Filing Fee	\$\text{\$\text{\$\text{\$\text{\$\text{\$}}}\$} \$78.75}\$ Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	IRA SOCHET Name (P) 8606 BOULDER C	rinted or typed)		
		Address		

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

City, State & Zip

Daytime Telephone number

TAMPA, FL 33615

(813) 884-3388

na 10-18

ARTICLES OF INCORPORATION

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

FILED

ARTICLE I NAME

00 OCT 16 AM 9:55

The name of the corporation shall be:

ADVANTAGE HOME CARE, INC.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

8606 BOULDER COURT TAMPA, FL 33615

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

HOME HEALTH AGENCY

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS DIRECTORS (optional)

The name(s) and address(es):

1. IRA SOCHET
PO BOX 756
SOUTH MIAMI, FL 33413

2. WILLIAM LUPO 9125 CYPRESS KEEP LANE ODESSA, FL 33556 3. THOMAS WINGO PO BOX 1802 OLDSMAR, FL 34677

ARTICLE VI REGISTERED AGENT

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

WILLIAM LUPO 8606 BOULDER COURT TAMPA, FL 33615

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

IRA SOCHET 8606 BOULDER COURT TAMPA, FL 33615

Signature/Registered Agent

Signature/Incorporator

Date /

Data