

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

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-11/01/00--01066--001
*****70.00 *****70.00

SUBJECT: EXCELCARE HOME SERVICES, 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: REGISTERED AGENTS LEGAL SERVICES, LLC
Name (Printed or typed)

1220 N. MARKET Street, Ste. 606 (LAWYER Bryda)
Address

WILMINGTON, DE 19801
City, State & Zip

800-400-6650
Daytime Telephone number

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

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00 NOV - 1 AM 8:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

EXCELCARE HOME SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7220 NW 70th Street, Ste. 228
Miami, FL 33166**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

An agency that recruits and hires lisenced and certified nursing assistant (CNA), HHA, Companions, Sitters, Homemakers to provide offsite services to patient in need;

ARTICLE IV SHARES

The number of shares of stock is:

100 shares of Common Stock with a par value of \$1.00.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Marie-May Lambert
1811 SW 179th Avenue
Miramar, FL 33029**ARTICLE VI REGISTERED AGENT**The name and Florida street address of the registered agent is:Marie-May Lambert
1811 SW 179th Avenue
Miramar, FL 33029**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Laura E. Bryda
1220 N. Market Street
Suite 606
Wilmington, DE 19801

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

Marie-May Lambert
Signature/Registered Agent

10/25/2000
Date

Laura E. Bryda
Signature/Incorporator

10/31/00
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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