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AZARUS CORPORATE FILING SERVICE (Requestor's Name) 3320 S.W. 87 AVENUE (Address)	p
MIAMI, FLORIDA (305)552-5973 (City, State, Zip) (Phone #) TERESA ROMAN (TALLAHASSEE REPRESENTATIVE) OFFICE USE ONLY	
CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): 1. A PLUS HOME HEALTH AGENCY CORP. (Corporation Name) (Document #)	
2. (Corporation Name) (Document #) 3. (Corporation Name) (Document #)	-
4. (Corporation Name) (Document #) Walk in Rick up time 100 (Document #) Walk in Will wait Photocopy Certificate of Status	
NEW FILINGS AMENDMENTS Amendment Resignation of R.A., Officer/Director Limited Liability Domestication Other AMENDMENTS AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal	
OTHER FILINGS Annual Report Fictitious Name Name Reservation REGISTRATION OUALAFICATION Limited Partnership Reinstatement Trademark	
Other Examiner's Initials	



The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

A Plus Home Health Agency Corp.

ARTICLE II - PRINCIPAL OFFICE

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

175 Fontainebleau Boulevard Miami, F1.33172 Suite 1-R-5

ARTICLE III -SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Claudia Ortega 9825 SW 49St. Miami, Fl. 33165

<u>ARTICLE V - INCORPORATOR</u>

The name and street address of the incorporator to these Articles of
Incorporation is: Claudia Ortegg
0825 SW 495+
miami F1, 33165
Miami, Fl. 33165 The undersigned incorporator has executed these Articles of
Incorporation this 4 day of January 20.01
Signature 8
Signature &
ARTICLE VI- DIRECTOR(S)
The name(s) and street address(es) of the director(s) to these Articles of
Incorporation is (are): Jocelyne Hilaire (President) 14346 S.W. 92 terr. (Treasurer) Miami, FL. 33186 Miami, FL. 33186
Jocelyne Hilaire President
14346 S.W. 92 terr. ("Casa")
miami, FL 33186
Miami, FL. 33186 Claudia Ortega (Vice President 9825 S.W. 49st (Secretary)
1825 S.W. 49st (Secretary)
Miami FL. 33165
CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE
Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.
Registered Agent Signature