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**LAZARUS CORPORATE FILING SERVICE**

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MIAMI, FLORIDA (305)552-5973

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

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-02/25/02--01036--013  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

OFFICE USE ONLY

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

1. ALICIA'S CARE CORPORATION  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in     Pick up time 2.00     Certified Copy
- Mail out     Will wait     Photocopy     Certificate of Status

02 FEB 25 PM 1:05  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA  
**FILED**

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input checked="" type="checkbox"/>	Foreign
<input checked="" type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Restatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

02 FEB 25 AM 10:40  
**RECEIVED**  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

*Handwritten signature/initials*

Examiner's Initials

**ARTICLES OF INCORPORATION  
FOR  
ALICIA'S CARE CORPORATION**

The undersigned, acting as 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:

**ALICIA'S CARE CORPORATION**

**ARTICLE II**  
**PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS**

The principal place of business of this corporation shall be:

**8411 SW 28<sup>TH</sup> STREET  
MIAMI, FLORIDA 33155**

**ARTICLE III**  
**INITIAL STOCK OFFERING**

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

**THE INITIAL STOCK OFFERING OF THE CORPORATION WILL BE FIVE HUNDRED (500) SHARES WITH A \$1 VALUE.**

**ARTICLE IV**  
**INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

**ALICIA LEON  
8411 SW 28<sup>TH</sup> STREET  
MIAMI, FLORIDA 33155**

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**ARTICLE V**  
**INCORPORATOR(S)**

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

President: ALICIA LEON  
Address: 8411 SW 28<sup>TH</sup> STREET  
MIAMI, FLORIDA 33155

**ARTICLE VI**  
**REGISTERED AGENT**

The name and Florida street address registered agent is:

ALICIA LEON  
8411 SW 28<sup>TH</sup> STREET  
MIAMI, FLORIDA 33155

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this

22 day of FEBRUARY 2002

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

Having been named as Registered Agent and to accept service of process of 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.

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Sections 607.0501 or 617.0501, Florida Statutes, the Undersigned Corporation, organized under the laws of the State of Florida, submits the following statement In designating the registered office/registered agent, in the State of Florida.

1- The name of the Corporation is: **ALICIA'S CARE CORPORATION**

2- The name and address of the registered agent and office is:

**ALICIA LEON  
8411 SW 28<sup>TH</sup> STREET  
MIAMI, FL. 33155**

Having been named as registered agent and to accept service of process for the above stated 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.

Signature *Alicia Leon*

Date February 22, 2002

**REGISTERED AGENT FILING FEE: \$35.00**

**DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL. 32314**

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