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OFFICE USE ONLY(DOCUMENT#) LAZARUS CORPORATE FILING SERVICE 3320 S.W. 87 AVENUE 900008282619-MIAMI, FLORIDA (305)552-5973 TERESA ROMAN (TALLAHASSEE REPRESENTATIVE) OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) (Document #) (Corporation Name) (Document #) (Corporation Name) Walk in Pick up time Certified Copy Certificate of Status Photocopy Mail out Will wait AMENUMENTS NEW FILINGS Amendment Profit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FLINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement OCT E MARINE Trademark

Other

Examiner's Initials

ARTICLES OF INCORPORATION

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

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A	RTI	CL	E	-	[-	N	A	M	E	

The name of the corporation shall be:

ROSAIDA HEALTH CARE, INC.

ARTICLE - II - PRINCIPAL OFFICE:

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

4163 NW. 135 STREET, OPALOCKA, FL.33054

ARTICLE - III - SHARES:

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

100 SHARES - \$ 5.00 EACH - PAR VALUE

ARTICLE - IV - INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and address of initial registered agent is:

IDA ESPINOSA, 4163 NW. 135 STREET, OPALOCKA, FL. 33054

ARTICLE - V - INCORPORATOR:

The name and address of the incorporator to these Articles of Incorporation is:

IDA ESPINOSA, 4163 NW. 135 STREET, OPALOCKA, FL. 33054

The undersigned incorporator has executed these Articles of Incorporation this 03 day of OCT. 20 02

Signature/Incorporator

ARTICLE - VI - DIRECTOR(S):

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

IDA ESPINOSA, 4163 NW. 135 STREET, OPALOCKA, FL. 33054 PRESIDENT/SECRETARY/TREASURER

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT:

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

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Signatura/Pagistared Agent	Doto

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