TRANSMITTAL LETTER

000110232

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

ENVANA HEALTHCARE SERVICES INC. SUBJECT: (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFLX)

\$87.50 \$70.00 \$78.75 \$78.75 Filing Fee Filing Fee, Filing Fee Filing Fee & Certified Copy Certified Copy & Certificate of Status & Certificate of Status ADDITIONAL COPY REQUIRED

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

ACELITA T. BALTAZAR FROM: Name (Printed or typed) 2411 JOYCE LANE Address NAPERVILLE, IL 60564 City, State & Zip 630-904-7434

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

Daytime Telephone number

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ARTICLES OF INCORPORATION	-	·	
In compliance with Chapter 607 and/or Chapter 621, F	.S. (Profit)		~
ADMINI DE LE STATED			2002 SEL
ARTICLE I NAME The name of the corporation shall be:		_M_	8
The name of the corporation shall be.	_		
ENVANA HEALTHCARE SERVICES INC.	÷		5
ARTICLE II PRINCIPAL OFFICE		= -	88 A S
The principal place of business/mailing address is:	= -	=- -	RIDA RIDA
PLACE OF BUSINESS: 1801 E. COLONIAL DRIVE	 -	<u> </u>	
ORLANDO, FLORIDA 32803 MAILING ADDRESS: 2411 JOYCE LN. NAPERVILLE.	-	_	
ARTICLE III PURPOSE	,		
The purpose for which the corporation is organized is:	:::		
TEMPORARY STAFFING/ NURSE AGENCY	_		
ARTICLE IV SHARES			
The number of shares of stock is:	=		
ONE		==	
	_ .	_	
ARTICLE V INITIAL OFFICERS/DIRECTO	RS <u>(optional)</u>		
The name(s), address(es) and title(s):			
ACELITA T. BALTAZAR, PRESIDENT			
2411 JOYCE LANE		-	
NAOERVILLE, IL 60564			
ARTICLE VI REGISTERED AGENT			
The name and Florida street address of the registered	agent is:	n :	-
ACELITA T. BALTAZAR 11782 SW 273 LANE	: <u>=</u>	=	
HOMESTEAD, FLORIDA 33032			
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ARTICLE VII INCORPORATOR The name and address of the Incorporator is:			
ACELITA T. BALTAZAR	. <u></u>		
2411 JOYCE LANE	_	-	
NAPERVILLE, IL 60564		ر المراجعة على مراجعة ع	مان ماند مان ماند ماند ماند ماند ماند

certificate, I am familiar with and accept the appointment as regi-	ess for the above stated corporati stered agent and agree to act in th	on at the place ue. his capacity	signuieu in inis
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- Chillera Bru		9/27/02	<u>.</u>
Signature/Registered Agent		Date	
- Procentiu		9/27/02	<u></u>
Signature/Incorporator		- Date	