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### FLORIDA PROFIT CORPORATION OR P.A.

HOME HEALTH AGENCY - NORTHWEST INDIANA, INC.

Certificate of Status	0
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# ARTICLES OF INCORPORATION OF HOME HEALTH AGENCY – NORTHWEST INDIANA, INC.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, adopts the following Articles of Incorporation:

## ARTICLE I

The name of the corporation is Home Health Agency - Northwest Indiana, Inc. (the "Corporation").

## ARTICLE II PRINCIPAL OFFICE AND MAILING ADDRESS

The principal office and mailing address of the Corporation is Home Health Agency - Northwest Indiana, Inc., 11780 West Sample Road, Suite 105, Coral Springs, Florida 33065.

#### ARTICLE III CAPITAL STOCK

The number of shares that the Corporation is authorized to issue is two thousand (2,000) shares of common stock having a par value of \$0.01 per share. Each issued and outstanding share of common stock shall be entitled to one vote on each matter submitted to a vote at a meeting of the shareholders.

### ARTICLE IV REGISTERED OFFICE AND AGENT

The street address of the Corporation's registered office is 350 East Las Olas Boulevard, Suite 1600, Fort Lauderdale, Florida 33301. The name of the Corporation's registered agent at that office is American Information Services, Inc.

#### ARTICLE V INDEMNIFICATION

The Corporation shall indemnify any present or former officer or director, or person exercising any duties of an officer or director, and shall advance expenses on behalf of any such officer, director or other person, in each case, to the fullest extent now or hereafter permitted by law.

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ARTICLE VI AFFILIATED TRANSACTIONS AND CONTROL SHARE ACQUISITIONS

The Corporation expressly elects not to be governed by Sections 607.0901 and 607.0902 of the Florida Business Corporations Act, relating to affiliated transactions and control share acquisitions, respectively.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation on October 2004.

David C. Peck, Incorporator

Address: 350 East Las Olas Boulevard

Suite 1600

Fort Lauderdale, FL 33301

#### CERTIFICATE OF ACCEPTANCE BY REGISTERED AGENT

Pursuant to the provisions of Sections 627.13 and 607.0501 of the Florida Business Corporation Act, the undersigned submits the following statement in accepting the designation as registered agent and registered office of HOME HEALTH AGENCY – NORTHWEST INDIANA, INC., a Florida corporation (the "Corporation"), in the Corporation's Articles of Incorporation:

Having been named as registered agent and to accept service of process for the Corporation at the registered office designated in the Corporation's Articles of Incorporation, the undersigned accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and the undersigned is familiar with and accepts the obligations of its position as registered agent.

IN WITNESS WHEREOF, the undersigned has executed this Certificate this 2 day of October, 2004.

AMERICAN INFORMATION SERVICES, INC.

Donn Beloff, Assistant Secretary

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