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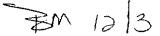
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ARTICLES OF INCORPORATION

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.

ARTICLE I - NAME

The name of the corporation shall be:

Royal Home Health Agency Service Corp.

ARTICLE II - PRINCIPAL OFFICE

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

seel. 131 St. 13370 M'ani, Fl. 33186

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:

Barbara Hernandez 13310 Sul 131 St. #108 Miani, Fl. 33186

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is: Felipe Heenandez
Barbara Hernandez 13370 sal 1315t. Miani, Fl. 33186
Barbara Hernandez 13370 sat 13154. Mianii, Fl. 33186 The undersigned incorporator has executed these Articles of #108 Incorporation this day of 20_U
Signature
ARTICLE VI- DIRECTOR(S)
The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are): Barbara Hernandez -> President 13370 sai. 131 st. #108 Miani Fl. 33186
Barbara Hernandez -> Presidento
13370 sai. 131 st. #108
Mianie, Fl. 33186
Felipe Hernandez 13370 sur 13/51. #108 Viceprendent. M'anci, FL 33/86 CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE
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

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