P05000031008

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000050991 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

```
To:
     Division of Corporations
     Fax Number      : (850)205-0381

From:
     Account Name    : EXPRESS CORPORATE FILING SERVICE INC.
     Account Number  : I20000000146
     Phone           : (305)444-4994
     Fax Number      : (305)444-4977
```

FLORIDA PROFIT CORPORATION OR P.A.

HUMAN LIFE CARE, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	$78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 MAR -1 AM 9:18

Electronic Filing Menu Corporate Filing Public Access Help

Nov 29 2005 11:50AM ECFS 3054444977 p.1

(((H05000050991)))

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

HUMAN LIFE CARE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4343 WEST FLAGLER ST STE 200-I
MIAMI FL 33134

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MEDICAL AND REHABILITATION CENTER

ARTICLE IV SHARES

The number of shares of stock is:

500 SHARES TO $1.00 EACH

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

JULIO GUEVARA
11392 SW 189 STREET
MIAMI FL 33157

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

JULIO GUEVARA
11392 SW 189 STREET
MIAMI FL 33157

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JULIO GUEVARA
11392 SW 189 STREET
MIAMI FL 33157

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 MAR -1 AM 9:18

****

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

X _____ 03/01/2005
Signature/Registered Agent — Date

X _____ 03/01/2005
Signature/Incorporator — Date