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(Business Entity Name)

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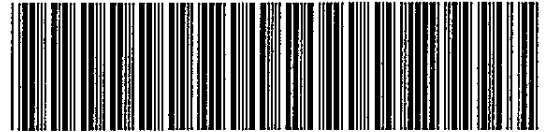
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TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Weston DIRECT CARE, INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$70.00 Filing Fee
☒ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy

☒ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Zetuna Arudu
Name (Printed or typed)

4111 - Cinnamon Way
Address

Weston, Florida 33331
City, State & Zip

954-709-4482
Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME:

The name of the corporation shall be: **WESTON DIRECT CARE, INC.**

ARTICLE II PRINCIPAL OFFICE:

The principal place of Business/Mailing address is: **4111 Cinnamon Way, Weston, Florida 33331**

ARTICLE III PURPOSE:

The purpose for which the business is organized is to provide quality direct care and other related health care services to patients/clients through referral or solicitation from individuals, agencies, institutions and other health care providers.

ARTICLE IV SHARES:

The number of shares of stock is 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS:

The names, addresses and specific titles of the corporate officers are:

Zetuna Arugu, 4111-Cinnamon Way, Weston, Florida 33331 President/CEO

Benjamin Mordi, 4111 Cinnamon Way, Weston, Florida 33331 COO

Adewale Koleosho, 4925 West Old Shakopee Rd, Bloomington, MN 55437 Chairman

Sonnie Braih, 4912-53rd Avenue North, Minneapolis, MN 55429 CFO/Secretary

ARTICLE VI REGISTERED AGENT:

The name and Florida street address of the Registered Agent is:
Benjamin Mordi - 4111 Cinnamon Way, Florida 33331

ARTICLE VII INCORPORATOR:

The name and address of the incorporator is:
Zetuna Arugu, 4111 Cinnamon Way, FL 33331

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.

Benjamin Mordi
Signature/Registered Agent

2/28/05
Date

Zetuna Arugu
Signature/Incorporator

2/28/05
Date

FILED
05 MAR -7 PM 3:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA