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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
05 APR 11 PM 2:01

TRANSMITTAL LETTER

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

SUBJECT: KizAnn HomeCare Services 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Ralph Zolin
Name (Printed or typed)

2991 Garden Drive South #302
Address

Lake Worth Florida 33461-6235
City, State & Zip

734c 283 9940
Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 APR 11 PM 2:01

ARTICLE I NAME

The name of the corporation shall be:

KizAnn HomeCare Services Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2991 Garden Drive South #302
Lake Worth, Florida 33461-6235

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Providing home health aid services

ARTICLE IV SHARES

The number of shares of stock is:

100,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARTICLE VI REGISTERED AGENT

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

Ralph Zolin
2991 Garden Drive South #302
Lake Worth, Florida 33461-6235

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

KizAnn Drinosky-Zolin
2991 Garden Drive South #302
Lake Worth, Florida 33461-6235

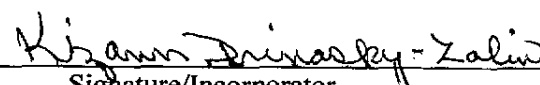
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

9/6/05

Date



Signature/Incorporator

4-6-05

Date