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Division of Corporations
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FLORIDA PROFIT CORPORATION OR P.A.

New Horizons Home Care Inc.

Certificate of Status	1
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J. Shivers JUL 13 2005

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:

New Horizons Home Care Inc.

ARTICLE II PRINCIPAL OFFICE

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

New Horizons Home Care Inc.

**1505 SE 13th Street
Cape Coral, FL 33990**

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ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Nancy Bennett
1505 SE 13th Street
Cape Coral, FL 33990**

Prepared By:

**Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940**

ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

Helen Troncoso- 103 Commons Way, Somerset, NJ 08873- President
Juana Calderon- 25 Weeks Avenue, Central Islip, NY 11722- Vice President
Carlos Troncoso- 25 Weeks Avenue, Central Islip, NY 11722- Treasurer

ARTICLES VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Helen Troncoso- 103 Commons Way, Somerset, NJ 08873
Juana Calderon- 25 Weeks Avenue, Central Islip, NY 11722
Carlos Troncoso- 25 Weeks Avenue, Central Islip, NY 11722

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

1st day of July 2005.


Helen Troncoso - Signature


Juana Calderon - Signature


Carlos Troncoso - Signature

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **New Horizons Home Care Inc.**

2. The name and address of the registered agent and office is:

Nancy Bennett

Name

1505 SE 13th Street

(P.O. Box or Mail Drop Box NOT Acceptable)

Cape Coral, FL 33990

(City / State / Zip)

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Having been named as registered agent and to accept service of process for the above stated corporation at the 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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.


Nancy Bennett
SIGNATURE

July 1, 2005

(Date)