Florida Department of State

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FLORIDA PROFIT CORPORATION OR P.A.

FLORIDACARE HOME HEALTH, CORP.

Certificate of Status	0
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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:

FLORIDACARE HOME HEALTH, CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 633 NE 167 ST. STE: 517
NORTH MIAMI BEACH, FL 33162

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: SHARES: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ELENI V. FIGUEROA (P/D) 633 NE 167 ST. STE: 517 NORTH MIAMI BEACH; FL 33162

ARTICLE VI REGISTERED AGENT

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

ELENI V. FIGUEROA 633 NE 167 ST. STE: 517 NORTH MIAMI BEACH, FL 33162

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ELENI V. FIGUEROA 633 NE 167 ST. STE: 517 NORTH MIAMI BEACH, FL 33162

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Having been named as registered agent to t	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

08-16-05

08-16-05

Date

Date

Signature/Incorporator

SECRETARY OF STAT