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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

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2005 AUG 18 AM 10:46
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

a & c home health corp

Certificate of Status	1
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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:

A & C HOME HEALTH CORP

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

508 East Drive Miami Springs FL 33166

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ALL AND ANY LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

CARLOS DEL CASTILLO 508 East Drive Miami Springs FL 33166 PRESIDENT
ANA L RODRIGUEZ 508 East Drive Miami Springs FL 33166 VICEPRESIDENT

ARTICLE VI REGISTERED AGENT

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

CARLOS DEL CASTILLO 508 East Drive Miami Springs FL 33166

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CARLOS DEL CASTILLO 508 East Drive Miami Springs FL 33166

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	_____ Date
_____ Signature/Incorporator	_____ Date

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