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TALLAHASSEE, FLORIDA  
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54

TRANSMITTAL LETTER

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

SUBJECT: Ramar Home Healthcare Services, Inc.  
(Proposed corporate name-must include suffix)

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

☐ \$70.00  
Filing fee

☒ \$78.75  
Filing fee  
& Certificate

☐ \$122.50  
Filing fee  
& Certified Copy

☐ \$131.25  
Filing fee,  
Certified Copy  
& Certificate

FROM: Clifton H. Rodriguez, C.P.A.  
(Name (printed or typed))

3146 N.W. 68 Street

Ft. Lauderdale, Florida 33309

Voice: (954) 969-9380

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

# ARTICLES OF INCORPORATION

For

**Ramar Home Healthcare Services, Inc.**

The undersigned subscribers for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:

## Article I-Name of the Corporation

The name of the corporation shall be:

**Ramar Home Healthcare Services, Inc.**

## Article II-Nature or Purpose of the Business

The purpose of the corporation is to engage in any lawful activity permitted by the laws of this state. The corporation will offer home healthcare services to its clients in the Tri-County area, and the State of Florida. The corporation will comply with any professional regulations imposed by the Florida Department of Business & Professional Regulations and any other state agencies within the State of Florida as well.

## Article III-Principal Office

The principal business mailing address of this corporation shall be:

3146 NW 68 Street  
Ft. Lauderdale, Florida 33309-1206

## Article IV-Number of Shares Authorized

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

One Thousand (1,000)

(The par value of the corporation common stock will be \$1.00) Maureen Higgins will own 100% of the outstanding shares of the corporation stock (i.e., equity of the corporation).

## Article V-Initial Registered Agent

The name and address of the initial registered agent is:

Clifton H. Rodriquez, CPA  
3146 NW 68 Street  
Ft. Lauderdale, Florida 33309

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

# ARTICLES OF INCORPORATION

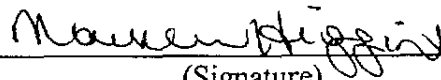
For

**Ramar Home Healthcare Services, Inc.**

## Article VI-Subscriber(s)

Maureen Higgins  
7750 NW 78<sup>th</sup> Avenue  
Ste. No.110  
Tamarac, Florida 33321

The undersigned subscribers have executed these Articles of Incorporation this  
9<sup>th</sup> day of December, 2005

  
(Signature)

## Article VII-Perpetual Life

The corporation shall have a perpetual existence unless a majority of board of directors, or the shareholders decides to discontinue the existence of the corporation.

## Article VIII-Appointment of the Officers and Board of Directors

The Board of Directors shall be appointed in accordance with the Bylaws of the corporation. Each Board member shall be appointed in accordance with the Bylaws of the corporation, and shall carry out their responsibilities in a sincere and trustworthy manner. The following officers have been appointed by the Board of Directors:

|    | <u>Name</u>               | <u>Address</u>  | <u>Position</u>           |
|----|---------------------------|---|---------------------------|
| 1. | Maureen Higgins           | 7750 NW 78 <sup>th</sup> Avenue<br>Apt. No. 110<br>Tamarac, Florida 33321 | President/CEO/            |
| 2. | Maureen Higgins           | 7750 NW 78 <sup>th</sup> Avenue<br>Apt. No. 110<br>Tamarac, Florida 33321 | Corp.Secretary/Director   |
| 3. | Clifton H. Rodriquez, CPA | 3146 NW 68 Street<br>Ft. Lauderdale, Florida 33309                        | Board Advisory/Ex-officio |

**CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE**

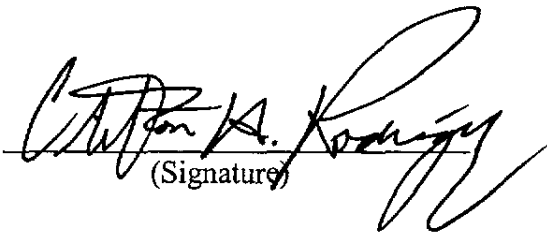
PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENTS IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

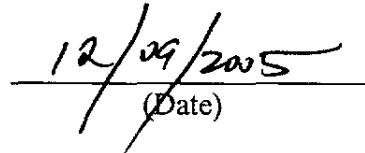
1. The name of the corporation is: **Ramar Home Healthcare Services, Inc.**
2. The name and address of the registered agent and office are as follows:

**Clifton H. Rodriquez, CPA  
3146 NW 68 Street  
Tamarac, Florida 33321**

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CLAY COUNTY  
TALLAHASSEE, FLORIDA**

*Having been named as registered agent and to accept service 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 statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.*

  
(Signature)

  
(Date)