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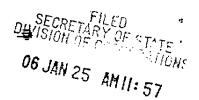
**NURSE 4 YOU, INC.** 

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# ARTICLES OF CORPORATION ARTICLES OF INCORPORATION

OF: NURSE 4 YOU, INC.

THE UNDERSIGNED INCORPORATOR(S), FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA GENERAL CORPORATION ACT, HEREBY ADOPT (S) THE FOLLOWING ARTICLES OF INCORPORATION.

#### ARTICLE I.

THE NAME OF THE CORPORATION SHALL BE: NURSE 4 YOU, INC.

THE PRINCIPAL PLACE OF BUSINESS OF THIS CORPORATION SHALL BE: 4425 N.V. 203RD STREET MIAMI GARDENS; FLORIDA 33056

## ARTICLE II. NATURE OF BUSINESS

THIS CORPORATION MAY ENGAGE IN OR TRANSACT ANY OR ALL LAWFUL ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES, THE STATE OF FLORIDA, OR ANY OTHER STATE, COUNTRY, TERRITORY OR NATION.

#### ARTICLE III. CAPITAL STOCK

THE AGGREGATE NUMBER OF SHARES OF STOCK AND ITS PAR VALUE THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS: 1000 PAR VALUE ------, ONE THOUSAND DOLLARS (\$1000.00).

# ARTICLE IV. TERM OF EXISTENCE

THIS CORPORATION IS TO EXIST PERPETUALLY.

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# ARTICLES OF CORPORATION

#### ARTICLE V. OFFICERS DIRECTORS

THE NAME (S) AND STREET ADDRESS (ES) OF THE INITIAL OFFICER (S) AND DIRECTOR (S), IF ANY, WHO SHALL HOLD OFFICE THE FIRST YEAR OF THE CORPORATION'S EXISTENCE OR UNTIL THEIR SUCCESSOR (S) IS (ARE) ELECTED, IS (ARE):

PRESIDENT: ULALEE LAWRENCE

4425 N.W., 203RD STREET

MIAMI GARDENS, FLORIDA 33056

VICE PRES:

# ARTICLE VI. INCORPORATOR (\$)

THE NAME (S) AND STREET ADDRESS (ES) OF THE INCORPORATOR (S) TO THIS ARTICLES!
OF INCORPORATION IS (ARE):

PRESIDENT: ULALEE LAWRENCE

4425 N.W. 203RD STREET

MIAMI GARDENS, FLORIDA 33056

VICE PRES:

PREPARED BY: BARBARA FOUST, CPA 3401 N.W. 202ND STREET

MIAMI GARDENS, FLORIDA 33056-1722

(305) - 623-5109 - (OFFICE)

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IN WITNESS WHEREOF, THE UNDERSIGNED INCORPORATOR (S) HAS (HAVE)

## ARTICLES OF CORPORATION

EXECUTED
THESE ARTICLES OF INCORPORATION THIS: JANUARY 4TH, 2006.

SIGNATURE (S) OF THE INCORPORATOR (S)

ULALEE LAWRENCE, PRESIDENT

# CERTIFICATE OF DESIGNATION

## REGISTERED AGENT AND REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.325, FLORIDA STATUTES. THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

THE NAME OF THE CORPORATION:

NURSE 4 YOU, INC.

THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

BARBARA FOUST, CPA 3401 N.W. 202ND STREET MIAMI GARDENS, FLORIDA 33056-1722 (305)-623-6109

SIGNATURE:

BARBARA FOUST

ARTICLES OF CORPORATION

TITLE: REGISTERED AGENT

DATE: JANUARY 4TH, 2006

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION. AT THE PLACE DESIGNATED IN THIS CERTIFICATE. I HEREBY AGREE TO

ACT IN THIS CAPACITY. AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS

ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607,325, FLORIDA STATUTES.

SIGNATURE:

DATE:

JANUARY 4TH, 2006

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