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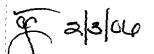


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Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time 2.05 Certified Copy Walk in Mail out ☐ Will wait Photocopy Certificate of Status NEW FILINGS <u>AMENDMENTS</u> Profit Amendment Not for Profit Resignation of R.A., Officer/Director Change of Registered Agent Limited Liability Domestication Dissolution/Withdrawal Other **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other

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#### ARTICLES OF INCORPORATION

IALLAHASSEE FLORIDA

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 1 - NAME**

The name of the corporation shall be:

Nursing-R-Us, INC.

#### ARTICLE II - PRINCIPAL OFFICE

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

5600 SW 135 Ave Suite # 214-F miani, Fl 33183

#### **ARTICLE III -SHARES**

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

100

### **ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

Carmen J. Fiernandez 6380 N.W. 114th Ave. Unit 334 Doral, Fla 33178

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#### **ARTICLE V - INCORPORATOR**

Incorporation is:  Carmen J. Fornandez	5600 6W 135 Ave Suite#
duisa Nonez	214-F miami, FL 33183

The undersigned incorporator has executed these Articles of Incorporation this / day of February 2006

Signature

#### ARTICLE VI DIRECTOR(S)

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

Carmen J. Kornandez - President Luna Nunez - Vice - President

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature