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# LAZARUS CORPORATE FILING SERVICE

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MIAMI, FL 33165 (305) 552-5973

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CORPORATION NAME(S) & DOCUM	MENT NUMBER(S), (if known):
1. HARMONY HO,	ME HEALTH CARE INC.
2. (Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
Walk in Pick up time	2.06 E Certified Copy
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NEW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other
CR2E031(7/97)	Examiner's Initials
-1::: · /	



#### ARTICLES OF INCORPORATION

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 I - NAME**

The name of the corporation shall be: HARMONY HOME HEALTH CARE INC

## **ARTICLE 11 - PRINCIPAL OFFICE**

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

1082 N.W. 134PL MIAMI FL 33182

### 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:

CALIXTO J. PADRON

1080 N.W 134 PL

MIAMI FL 33182

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

The name and street address of the incorporator to these Articles of Incorporation is:

CALIXTO J. PADRON 1082 N.W. 134 PC MIAMI FL 33182

The undersigned incorporator has executed these Articles of Incorporation this 16 day of FRADARY 2006

Signature

# ARTICLE VI DIRECTOR(S)

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

CALIXTO PADRON 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