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☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

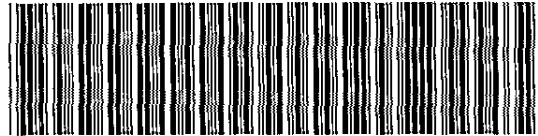
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02/24/06--01031--008 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 FEB 28 PM 4:19

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06 FEB 24 PM 12:13
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLahassee, FLORIDA

D. Brown MAR - 1 2006

**LAZARUS
CORPORATE FILING SERVICE**

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. FIRST RATE HOME HEALTH CARE
(Corporation Name) (Document #)
2. CORPORATION
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in

☐ Mail out

☒ Pick up time

☐ Will wait

2.00

☐ Photocopy

☒ Certified Copy

☐ Certificate of Status

NEW FILINGS

- ☒ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
06 FEB 28 AM 11:20
DIVISION OF CORPORATION

February 27, 2006

LAZARUS CORPORATE FILING SERVICE
3320 SW 87TH AVENUE
MIAMI, FL 33165

SUBJECT: FIRST RATE HOME HEALTH CARE CORPORATION
Ref. Number: W06000009563

We have received your document for FIRST RATE HOME HEALTH CARE CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity must be identical throughout the document.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden
Document Specialist
New Filing Section

Letter Number: 906A00013646

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 FEB 28 PM 4: 20

Certificate of Incorporation

Of

First Rate Home Health Care Corporation

We, the undersigned, hereby associate ourselves together for
The purpose of becoming a corporation under the laws of the
State of Florida providing for the information of a corporation
For profit, with the powers, rights, privileges and immunities
Hereinafter mentioned, and we hereby make, subscribe, acknowledge
And file with the secretary of state of Florida this certificate
Of incorporation; and to what en we do, by this certificate, set
Forth;

Article I

The name of this corporation (which is hereinafter called the
"corporation" is :

First Rate Home Health Care Corporation

Article II

The general nature of the business and the objects and
Purposes to be transacted and carried on are to do any and all
Things allowed and permitted to be done by corporations under the
Statues of the state of Florida, and to do any and all things as
Fully and to the same extent as natural persons might or could
Do.

Article III

To carry on the business of a holding company and to purchase
And acquire any mercantile or commercial business, trade or
Enterprise permitted by the laws of the state of Florida , and to
Own, hold, operate, maintain, use, sell or otherwise dispose to
The same; to enter into or engage in any such business, trade or
Enterprise.

Article IV

The stock of the corporation shall be divided into five hundred
(\$500.00) shares of stock of the par value of one dollar (\$1.00)
per share, all of one class, name, common stock, and having
an aggregate per value of five hundred (\$500.00) dollars, all
said stock shall be payable in cash, property, labor of services
at a just valuation to be fixed by the board of directors at a

meeting called for the purpose; property, labor or services may be purchased or paid for with the capital stock; at a just valuation to be fixed by the board of directors at a meeting called for that purpose.

Article V

The amount of capital with which this corporation shall begin Business shall be not less than five hundred (\$500.00) dollars.

Article VI

The principal place of business of the corporation shall be
At: 5757 SW 8 th Street Suite # 204 Miami, Florida 33144
With the privilege of having branch offices within and
Without the state of Florida.

Article VII

This corporation shall have [er]ertia; existence.

Article VIII

The names and post office addresses of the first Board of Directors of the corporation, who shall hold office for the First year, or until their successors are chose, shall be:

Beatriz de Zayas – Director
5757 SW 8 th Street Suite # 204
Miami, Florida 33144

Article IX

The number of directors of the corporation shall be at least One (1) but no more than fifteen (15).

Article X

The name and addresses of president, vice president, secretary, Treasurer, who shall hold office until their successors are Selected or appointed or have qualities are:

Beatriz de Zayas – President
5757 S. W. 8 th Street Suite # 204
Miami, Florida 33144

Beatriz de Zayas – Vice President
5757 S W 8 th Street Suite # 204
Miami, Florida 33144

Beatriz De Zayas – Secretary
5757 SW 8 th Street Suite # 204
Miami, Florida 33144

Beatriz de Zayas – Treasurer
5757 SW 8 th Street Suite # 204
Miami, Florida 33144

Article XI

The names and post office addresses of each susbscriber and the
Number of share of stock with each agrees to take are:

Beatriz de Zayas – 500 shares
5757 SW 8 th Street Suite # 204
Miami, Florida 33144

Total shares: five hundred (500) shares, all of the proceeds of which
Will amount to at least five hundred (500) dollars.

In WITNEWW WHEREOF, we have hereunto set our hands and seals,
And acknowledge to be filed in the office of the secretary of
State the foregoing certificate of incorporation, this 23 day
Of FEBRUARY 2006.

COUNTY OD DADE)

SS:

STATE OF FLORIDA)

BEFORE ME, the undersigned authority, dully authorized to
Administer oath and take acknowledgments, personally appeared:

Beatriz de Zayas

And each severally acknowledged before me that they signed the
Foregoing certificate of incorporation for the purposes therein
Expressed.

WITNESS my hand and official seal at the city of Miami,
County of Dade, State of Florida, this ____ day of ____
20____.

My commission expires:

Notary Public
State of Florida

Certificate designating place of business for the service
Of process within Florida, naming agent upon who process
May be served.

In compliance with section 48.091., florida statues, the
Following is submitted:

First that First Rate Home Health Care Corporation desiring
To organize or qualify under the laws of the state of Florida,
With its principal place of business at city of Miami, State of
Florida, has named Beatriz de Zayas, located at 5757 S W 8th Street
Suite # 204 city of Miami, state of Florida, as its agent to accept
Service of process within Florida.

Signature: Beatriz de Zayas
(corporate officer)

Title : President

Date: February 23, 2006

Having been made 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 further agree to comply
With the provisions of all statues relative to the proper and
Complete performance of my duties.

Signature: Beatriz de Zayas
Registered Agent / INCORPORATED
Date: February 23, 2006

FILED
STATE
SECRETARY OF
DIVISION OF CORPORATIONS
06 FEB 28 PM 4:20