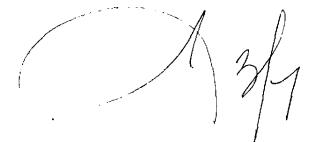
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(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
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. PICK-UP	TIAW [MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only





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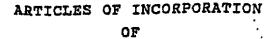
LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

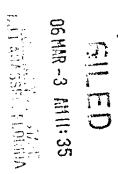
MIAMI, FL 33165 (305) 552-	5973
	Office Use Only
CORPORATION NAME(S) & DOCU	
1. PATIENT CARE HO (Corporation Name)	OMEHEALTH INC.
2. (Corporation Name)	
(Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
Walk in Pick up time	2.00
☐ Mail out ☐ Will wait	Photocopy
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

Examiner's Initials

CR2E031(7/97)



PATIENT CARE HOMEHEALTH INC.



THE UNDERSIGNED SUBSCREBERS TO THESE ARTICLES, EACH A NATURAL PERSON COMPETENT TO CONTRACT, HEREBY ASSOCIATE TO FORM A CORPORATION UNDER THE LAWS OF THE STATES OF FLORIDA.

ARTICLE I - NAME
THE NAME OF THIS CORPORATION IS: PATIENT CARE HOMEHEALTH, INC.

ARTICLE II - NATURE, OF BUSINESS

TO MANUFACTURE, PURCHASE, OR OTHERWISE ACQUIRE, TO OWN, MORTGAGE, PLEDGE, SELL, ASSIGN, TRANSFER, OR OTHERWISE DISPOSE OF, TO INVEST IN, TRADE IN, DEAL, IN AND WITH GOODS, WARES, MERCHANDISE, REAL AND PERSONAL PROPERTY, AND SERVICES OF EVERY CLASS, KIND AND DESCRIPTION WHEN PROPERLY LICENSED AND AUTHORIZED BY THE STATE TO OPERATE IN THOSE ACTIVITIES IN WHICH SUCH LICENSING AND AUTHORIZATION IS MANDATORY. TO CONDUCT BUSINESS, IN, HAVE ONE OR MORE OFFICES IN, AND BUY HOLD, MORTGAGE, SELL, CONVEY, LEASE, OR OTHERWISE—DISPOSE OF REAL AND PERSONAL PROPERTY, INCLUDING FRANCHISES, PATENTS, COPYRIGHTS, TRADEMARKS AND LICENSES, IN THE STATE OF FLORIDA AND IN ALL OTHER STATES AND COUNTRIES. TO CONTRACT DEBTS AND BORROW MONEY, ISSUE AND SELL OR PLEDGE BONDS DEBENTURES, NOTES AND OTHER EVIDENCES OF INDEBTNESS, AND TO EXECUTE SUCH MORTGAGES, TRANSFERS OF CORPORATE PROPERTY, OR OTHER INSTRUMENTS, TO SECURE THE PAYMENT OF CORPORATE INDEBTNESS AS REQUIRED. TO PURCHASE THE CORPORATE ASSETS OF ANY OTHER CORPORATION AND ENGAGE IN THE SAME OR OTHER CHARACTER OF BUSINESS.

TO GUARANTEE, ENDORSE, PURCHASE, HOLD, SELL, TRANSFER, MORTGAGE, PLEDGE, OR OTHERWISE ACQUIRE OR DISPOSE OF THE SHARES OF CAPITAL STOCK OF, OR ANY BONDS, SECURITIES, OR OTHER EVIDENCES OF INDEBTNESS CREATED BY ANY OTHER CORPORATION OF THE STATE OF FLORIDA OR ANY, OTHER STATE, GOVERNMENT OR COUNTRY, AND WHILE OWNER OF SUCH STOCK TO EXERCISE ALL RIGTHS, POWERS AND PREVILEGES OF OWNERSHIP, INCLUDING THE RIGHT TO VOTE SUCH STOCK.

ARTICLE III- CAPITAL STOCK
THE MAXIMUN NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS
AUTHORIZED TO HAVE GUTSTANDING AT ANY TIME IS: ONE HUNDRED
SHARES OF COMMON STOCK WITH A PAR VALUE OF \$ 1.00 EACH.

ARTICLE IV- INITIAL CAPITAL
THIS CORPORATION WILL BEGIN BUSINESS WITH 100 SHARES OF CAPITAL.
ARTICLE V- TERM OF EXISTENCE
THIS CORPORATION IS TO EXIST PERPETUALLY.

ARTICLE VI- ADDRESS

THE INITIAL POST OFFICE ADDRESS OF THE PRINCIPAL OFFICE OF THIS CORPORATION IN THE STATE OF FLORIDA IS:

13055 S.W. 42nd STREET #104

MIAMI, FL. 33175

THE BOARD OF DIRECTORS MAY FROM TIME TO TIME MOVE THE PRINCIPAL OFFICE TO ANY OTHER ADDRESS IN THE STATE OF FLORIDA.

ARTICLE VII - DIRECTORS

THIS CORPORATION SHALL HAVE NO MORE THAN SIX (6) DIRECTORS INITIALLY. THE NUMBER OF DIRECTORS MAY BE INCREASED OR DIMINISHED FROM TIME TO TIME, BY THE BY-LAWS ADOPTED BY THE STOCKHOLDERS.

ARTICLE VIII - INITIAL DIRECTORS
THE NAMES AND POST OFFICE ADDRESSES OF THE MEMBERS OF THE FIRST BOARD OF DIRECTORS ARE:

NAME

ADDRESS

EDITH R. LAMAS

16400 COLLINS AVE. #2145, SUNNY ISLE BEACH FL. 33160

MARTA M. FUENTES

16238 SW. 44th LANE, MIAMI FL: 33185

ARTICLES IX - SUBSCRIBERS

THE NAME AND POST OFFICE ADDRESS OF EACH SUBSCRIBER OF THESE ARTICLES OF INCORPORATION, THE NUMBER OF SHARES OF STOCK EACH -- AGREES TO TAKE AND THE VALUE OF THE CONSIDERATION THEREOF IS:

NAME: EDITH R. LAMAS

ADDREES 16400 COLLINS AVE. #2145, SUNNY ISLE BEACH, FL. 33160

SHARES: 50

CONSIDERATION: # 50.00

NAME: MARTA R. FUEHTES

ADDRESS: 16238 SW. 44th LANE, MIAMI, FLORIDA 33185

SHARES: 50

CONSIDERATION: \$ 50.00

NAME; ADDRESS; SHARES; CONSIDERATION: *

ARTICLE X - AMENDMENTS

THESE ARTICLES OF INCORPORATION MAY BE AMENDED IN THE MANNER PROVIDED BY LAW. EVERY AMENDMENT SHALL BE APPROVED BY THE BOARD OF DIRECTORS, PROPOSED BY THEM TO THE STOCKHOLDERS, AND APPROVED AT A STOCKHOLDERS' MEETING BY A MAJORITY OF THE STOCK ENTITLED TO VOTE THEREON, UNLESS ALL THE DIRECTORS AND ALL STOCKHOLDERS SIGN A WRITTEN STATEMENT MANIFESTING THEIR INTENTION THAT A CERTAIN AMENDMENT OF THESE ARTICLES OF INCORPORATION BE MADE.

DATE

EDITH R. LAMAS

DATE 03/02/2006

MARTA M. FUENTES

DATE: 03/02/2006

STATE OF FLORIDA

COUNTY OF DADE

1, HEREBY CERTIFY THAT ON THIS DAY, BEFORE ME, A NOTARY PUBLIC DULY AUTHORIZED IN THE STATE AND COUNTY NAMED ABOVE TO TAKE ACKNOWLEDGE-MENTS, PERSONALLY APPEARED: EDITH R. LAMAS, AND MARTA M. FUENTES......

TO ME KNOWN TO BE THE PERSONS DESCRIBED AS SUBSCRIBERS AND WHO EXECUTED, THE FOREGOING ARTICLES OF INCORPORATION, AND ACKNOWLEDGED BEFORE ME THAT THEY SUBSCRIBED THOSE ARTICLES OF INCORPORATION.

WITNESS MY HAND AND OFFICIAL SEAL IN THE COUNTY AND STATE ABOVE THIS

NOTARY PUBLIC

MY COMMISSION EXPIRES:

LUIS GARCIA

Notary Public - Stale of Florida

My Commission Expires May 6, 2007

Commission # DD183472

Bonded By National Notary Assn.

* CERTIFICATE DEBIGNATING PLACE OF BUSINESS OR DOMICILE * FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING. * AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 48.091, Florida Statute, the following is submitted, in compliance with said Act:

Desiring to organize under the laws of the State of Florida with its principal office, as indicated in the Articles of Incorporation, at the City of MIAMI, DADE COUNTY, STATE OF FLORIDA, has named

EDITH R. LAMAS 16400 COLLINS AVE, SUNNY ISLE BEACH, FL.33160

as its agent to accept service of process within this State.

ACKNOWLEDGEMEN(...

Having been named to accept service of process for the above stated Corporation, at place designated in this certificate. I hereby accept to act in this capacity, and agree to comply with the provisions of said Act relative to keeping open said office.

RESIDENT AGENT EDITH & LAMAS

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