

FROM : JIM SIERRA & ASSOC  
Division of Corporations

FAX NO. : 305-271-4422

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Florida Department of State  
Division of Corporations  
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From:  
Account Name : JIM SIERRA & ASSOCIATES  
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**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**CARE PROVIDERS, INC.**

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## ARTICLES OF INCORPORATION

- OF -

### CARE PROVIDERS, INC.

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We, The UNDERSIGNED, hereby associate ourselves together for the purpose of becoming a corporation under the Laws of the State of Florida, by and under the provisions of the Statutes of the said State of Florida.

#### ARTICLE I

The name of this corporation shall be:

**CARE PROVIDERS, INC.**

#### ARTICLE II

The corporation may engage in any activity or business permitted under the laws of the United States and the State of Florida.

#### ARTICLE III

The maximum number of shares of capital stock that this corporation is authorized to have outstanding at any time is ONE HUNDRED (100) shares of common stock, having a par value of ONE DOLLAR (\$1.00) PER SHARE.

#### ARTICLE IV

The amount of capital with which this corporation will begin business shall be the sum of not less than ONE HUNDRED (\$100.00) DOLLARS.

Prepared by:  
JIM SIERRA & ASSOCIATES  
5330 SW 87TH AVENUE  
MIAMI, FL 33165  
TEL. (305) 271-7310  
FAX. (305) 271-4422

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**ARTICLE V**

This corporation shall exist perpetually unless sooner dissolved according to law.

**ARTICLE VI**

The initial street address of the principal office of the corporation shall be:

5190 NW 167<sup>TH</sup> STREET STE 113  
MIAMI LAKES, FL 33014

**ARTICLE VII**

The number of Directors of this corporation shall be at least one (1) and no more than five (5).

**ARTICLE VIII**

The name and street address of the member(s) of the first Board of Directors of this corporation is as follows:

DIVINIA A. CRUZ  
PRES/VICE-PRES/SEC/TREAS  
14561 SW 97<sup>TH</sup> STREET  
MIAMI, FL 33186

**ARTICLE IX**

The name and street address of the person(s) signing these Articles of Incorporation as subscriber is as follows:

DIVINIA A. CRUZ  
14561 SW 97<sup>TH</sup> STREET  
MIAMI, FL 33186

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**ARTICLE X**

The corporate existence of this corporation shall begin on the date the Articles of Incorporation are filed of record.

IN WITNESS WHEREOF, the undersigned, DIVINIA A. CRUZ, being natural person(s), competent to contract, has here unto set his/their hands and seal this 7<sup>th</sup> day of APRIL, 2006.



DIVINIA A. CRUZ  
PRESIDENT

Prepared by:  
JIM SIERRA & ASSOCIATES  
5550 SW 87<sup>th</sup> AVENUE  
MIAMI, FL 33165  
TEL. (305) 271-7310  
FAX (305) 271-4422

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**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

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TALLAHASSEE, FLORIDA

IN COMPLIANCE WITH SECTION 607.325, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST THAT: CARE PROVIDERS, INC.

WITH ITS PLACE OF BUSINESS AT: 5190 NW 167<sup>TH</sup> STREET STE 113 MIAMI LAKES, FL 33014

HAS NAMED DIVINIA A. CRUZ  
(Name of Registered Agent)

LOCATED AT: 14561 SW 97<sup>TH</sup> STREET MIAMI, FL 33186  
(Street address and number of building -- PO Box address ARE NOT acceptable)

CITY OF MIAMI, STATE OF FLORIDA, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN  
FLORIDA.

SIGNATURE



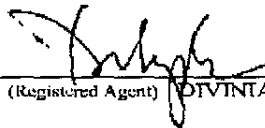
(Corporate Officer) DIVINIA A. CRUZ

TITLE: PRESIDENT

DATE: APRIL 7, 2006

I, HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATE 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 OF 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



(Registered Agent) DIVINIA A. CRUZ

DATE: APRIL 7, 2006

Prepared by:  
JIM SIERRA & ASSOCIATES  
5550 SW 87<sup>TH</sup> AVENUE  
MIAMI, FL 33165  
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