

PO6000058011

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400071428194

04/24/06--01024--008 \*\*70.00

FILED  
2006 APR 24 AM 9:37  
TALLAHASSEE FLORIDA

4/25/06

TRANSMITTAL LETTER

FILED

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

2006 APR 24 AM 9:38

DEPARTMENT OF STATE  
TALLAHASSEE FLORIDA

SUBJECT: New Era Home Health Care, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status  
**ADDITIONAL COPY REQUIRED**

FROM: JOCELYN A. MATIAS

Name (Printed or typed)

2632 ALABASTER AVE.

Address

ORLANDO, FLORIDA 32833

City, State & Zip

(407) 568-7849

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

2006 APR 24 AM 9:38

ARTICLE I NAME

The name of the corporation shall be:

New Era Home Health Care, Inc.

STATE OF FLORIDA  
TALLAHASSEE

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2632 Aabaster Avenue  
Orland, FL 32833

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To organize & operate a new home health care agency; To manage  
and/or invest into an existing home health care agency.

ARTICLE IV SHARES

The number of shares of stock is:

1,000 Shares (No Par Value)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name (s), address (es) and specific title (s):

Jocelyn A. Matias	- 2632 Alabaster Ave., Orlando, FL 32833	- President
Leonardo Francisco	- 5810 Hampshire Ave., Orlando, FL 32833	- Vice President
Edward Poyaoan	- 2546 Alabaster Ave., Orlando, FL 32833	- Treasurer
Geber Bugia	- 2632 Alabaster Ave., Orlando, FL 32833	- Secretary
Lorelie G. Samaniego	- 125 Exeter Rd., Munster, IN. 46321	- Director
Romeo H. Amores Jr.	- 310 Cornwall Cr., Munster, IN 46321	- Director

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Jocelyn A. Matias - 2632 Aabaster Ave., Orlando, FL 32833

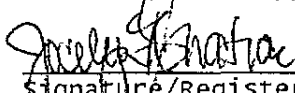
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jocelyn A. Matias	- 2632 Alabaster Ave., Orlando, FL 32833	- President
Leonardo Francisco	- 5810 Hampshire Ave., Orlando, FL 32833	- Vice President
Edward Poyaoan	- 2546 Alabaster Ave., Orlando, FL 32833	- Treasurer
Geber Bugia	- 2632 Alabaster Ave., Orlando, FL 32833	- Secretary
Lorelie G. Samaniego	- 125 Exeter Rd., Munster, IN. 46321	- Director
Romeo H. Amores Jr.	- 310 Cornwall Cr., Munster, IN 46321	- Director

\*\*\*\*\*

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

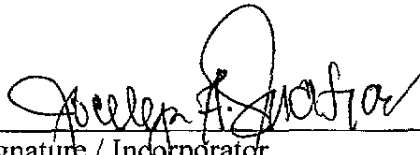
  
Signature/Registered Agent      4/16/06  
Date

NEW ERA HOME HEALTH CARE, INC.  
Articles Of Incorporation:

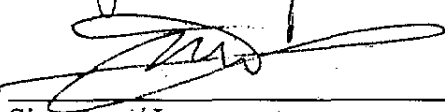
FILED

2006 APR 24 AM 9:38


STATE  
TALLAHASSEE FLORIDA

  
Signature / Incorporator

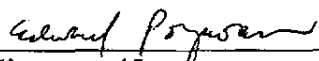
4/16/06  
Date

  
Signature / Incorporator

4/16/06  
Date

  
Signature / Incorporator

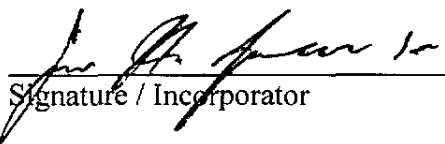
4/21/06  
Date

  
Signature / Incorporator

4-16-06  
Date

  
Signature / Incorporator

4/16/06  
Date

  
Signature / Incorporator

4/16/06  
Date