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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

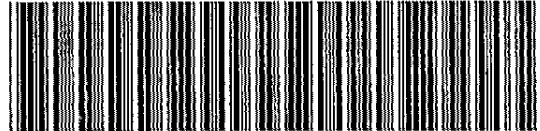
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE

TALLAHASSEE, FLORIDA

TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

**LAZARUS  
CORPORATE FILING SERVICE**

**3320 SW 87<sup>TH</sup> AVENUE**

**MIAMI, FL 33165 (305) 552-5973**

Office Use Only

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

1. CASTILLO HOME NURSING INC  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(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

**AMENDMENTS**

☐ Amendment

☐ Resignation of R.A., Officer/Director

☐ Change of Registered Agent

☐ Dissolution/Withdrawal

☐ Merger

**OTHER FILINGS**

☐ Annual Report

☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

☐ Foreign

☐ Limited Partnership

☐ Reinstatement

☐ Trademark

☐ Other

Examiner's Initials

## ARTICLES OF INCORPORATION

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

### ARTICLE I NAME

The name of the corporation shall be:

CASTILLO HOME NURSING INC

### ARTICLE II PRINCIPAL OFFICE

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

11704 NW 22 CT  
MIAMI, FL 33167

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is home nursing care services.

### ARTICLE IV SHARES

The number of shares of stock is:

ONE HUNDRED SHARES (100) WITH FIVE DOLLARS (\$5.00) VALUE PER  
SHARE

### ARTICLE V OFFICERS AND DIRECTORS

MAYELIN SERRANO, PRESIDENT  
11704 NW 22 CT  
MIAMI, FL 33167

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**ARTICLE VI      REGISTERED AGENT**

The name and Florida street address of the initial registered agent is:

MAYELIN SERRANO  
11704 NW 22 CT  
MIAMI, FL 33167

**ARTICLE VII   INCORPORATOR(S)**

The name(s) and address(es) of the Incorporator is


MAYELIN SERRANO  
11704 NW 22 CT  
MIAMI, FL 33167

.....

*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

\_\_\_\_\_  
8/28/2006  
Date

  
\_\_\_\_\_  
Signature      Incorporator

\_\_\_\_\_  
8/28/2006  
Date