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TALLAHASSEE, FLORIDA

10/11/06

**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. THE FAMILY HEALTH CARE POOL INC.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

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**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  
OF

THE FAMILY HEALTH CARE POOL INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

**ARTICLE I: NAME**

The name of the corporation shall be:

THE FAMILY HEALTH CARE POOL INC.

**ARTICLE II: PRINCIPAL OFFICE**

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

11181 SW 61<sup>st</sup> TERRACE MIAMI FL. 33173

**ARTICLE III: CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 SHARES OF \$5.00 EACH (\$500.00)

**ARTICLE IV: INITIAL REGISTERED AGENT & ADDRESS**

The name and address of the initial registered agent is:

MISLADYS MARTINEZ 11181 SW 61<sup>st</sup> TERRACE MIAMI FL. 33173

**ARTICLE V: INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator (s) to these Articles of Incorporation is (are):

MISLADYS MARTINEZ 11181 SW 61<sup>st</sup> TERRACE MIAMI FL. 33173

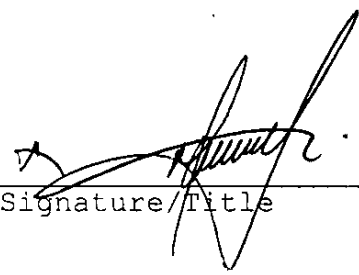
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TALLAHASSEE, FLORIDA

**ARTICLE VI: DIRECTOR(S)**

The name(s) of the director (s) in this corporation is (are):

MISLADYS MARTINEZ - PRESIDENT  
11181 SW 61<sup>st</sup> TERRACE  
MIAMI FL. 33173

The undersigned has (have) executed these Articles of Incorporation  
this 11<sup>th</sup> Days of Oct, 2006.



\_\_\_\_\_  
Signature/Title

\_\_\_\_\_  
Signature/Title

\_\_\_\_\_  
Signature/Title

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

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:

THE FAMILY HEALTH CARE POOL INC.

2. The name and address of the registered agents and office is:

MISLADYS MARTINEZ  
11181 SW 61<sup>st</sup> TERRACE  
MIAMI FL. 33173

SIGNED:   
(Corporate Officer)

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_

HAVING BEEN NAMED 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 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:  \_\_\_\_\_

DATE: \_\_\_\_\_

REGISTERED AGENT FILING FEE: \$20.00

06 OCT 13 PM 12:00  
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