

PO0000136491

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

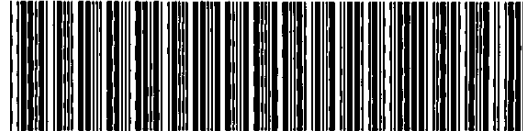
(Business Entity Name)

(Document Number)

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

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06 OCT 26 PM 12:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

2006 OCT 26 AM 11:12

NOTIFIED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

for 10/27/06

**LAZARUS**  
**CORPORATE FILING SERVICE**  
**3320 SW 87<sup>TH</sup> AVENUE**  
**MIAMI, FL 33165 (305) 552-5973**

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TALLAHASSEE, FLORIDA

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

1. ONE ON ONE HOME HEALTH CARE 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

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

Examiner's Initials

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**ARTICLES OF INCORPORATION**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

One on One Home Health Care Inc.

**ARTICLE II - PRINCIPAL OFFICE**

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

9445 SW 40 Street, suite #106  
MIAMI - FL , 33165

**ARTICLE III - SHARES**

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

100

**ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

Yulenia Perez  
9445 SW 40 Street, suite #106  
MIAMI, FL - 33165

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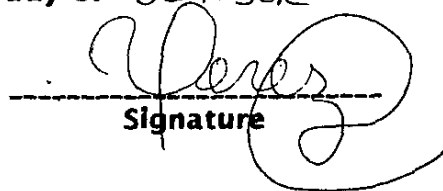
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE V - INCORPORATOR**

The name and street address of the incorporator to these Articles of Incorporation is:

Yulenia Perez, 9445 SW 40 Street Ste #  
Miami, FL, 33165

The undersigned incorporator has executed these Articles of Incorporation this 24 day of October 2006.

  
\_\_\_\_\_  
Signature

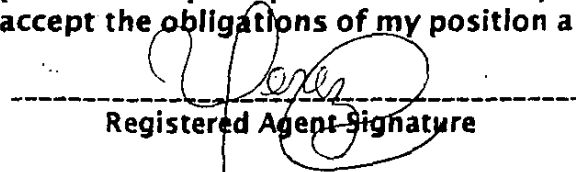
**ARTICLE VI- DIRECTOR (S)**

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

Yulenia Perez - President

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

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

  
\_\_\_\_\_  
Registered Agent Signature