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SECRETARY OF SIMIL ALLAHASSEE, FLORIDA

October 27, 2006

Department of State Division of Corporations 409 East Gaines Street Tallahassee, FI 32399

R.E.- Nannalynn, Inc.

To Whom It May Concern,

Please find enclosed for filing the Articles of Incorporation of Nannalynn, Inc.. We have submitted these Articles with the proper \$70.00 filing fee. Please return a stamped copy to show the date of filing, to the undersigned.

Sincerely,

Linda Hartford Salzinger

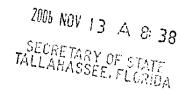
Director

FILED

ARTICLES OF INCORPORATION OF NANNALYNN, INC.

ARTICLE I

The name of the Corporation is Nannalynn, Inc.



ARTICLE II

The principal place of business and mailing address of this corporation shall be Nannalynn, Inc., 612 SW 22nd Ave., Ft. Lauderdale, FL 33312.

ARTICLE III

The Corporation is formed with the purpose of Nursing Services and related health services for a profit.

ARTICLE IV

The Director and officers are duly appointed by a majority vote of stockholders directly connected with the corporation.

ARTICLE V

The name and address of the Incorporator/Director to these Articles of Incorporation is Ms. Linda Hartford Salzinger, 612 SW 22nd Ave, Ft, Lauderdale, FI 33312.

ARTICLE VI

The Corporation lists Paul Ronca ,17912 NW 11 Street, Pembroke Pines,FL 33029, as its Registered Agent.

ARTICLE VIII

The Corporation issues 100 shares of stock at \$ 0 par value.

IN WITNESS WHEREOF, I have hereunto set my hand this 21st Day of October 2006.

Linda Hartford Salzinger, Director

612 SW 22nd Ave.

Ft. Lauderdale, FI 33312

<u>Certificate of Designation</u> <u>Registered Agent/Registered Office</u>

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned Corporation, organized under the laws 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: Nannalynn , Inc.
- 2. The name of the Registered Agent is: Paul Ronca
- 3. The address of the Registered Office is: 17912 N.W. 11th Street, Pembroke Pines, FI 33029

Having been named as Registered Agent and to accept Service Of Process for the above stated corporation at the place designated as the address of the Registered Office, I hereby accept the appointment as Registered agent and agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

accept the o	bligations of my position as registered	agent.
SIGNATURE	x Saul Street	
DATE	10-27-06	SECRE
	•	TARY O ASSEE
	·	F STA