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LAZARUS CORPORATE FILING SERVICE

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ORPORATION NAME(S) &	DOCUMENT NUMBER(S), (if known):
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Corporation Novel	NO HOME CARE INC
(Corporation Name)	(Document #)
	
(Corporation Name)	(Document #)
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(Corporation Name)	(Document #)
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NEW FILINGS	AMENDMENTS
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Not for Profit	Amendment Resignation of R.A., Officer/Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
☐ Other	☐ Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report	D residen
Fictitious Name	Foreign Limited Partnership
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Fictitious Name	Limited Partnership Reinstatement
Fictitious Name	Reinstatement Trademark

Examiner's Initials

CR2E031(7/97)

ARTICLES OF INCORPORATION

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:

585 Nursing Home Care inc.

2006 DEC -4 PN 12: 58
SECRETARY OF STATE
TALLAHASSEE, FI ORIDA

ARTICLE II - PRINCIPAL OFFICE

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

2750 SW 87 Ave 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:

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Sonia Livero 2300 SW 97 Ave APT- A-104 Migmi-Florida 33165

ARTICLE V - INCORPORATOR

The name and street address	ss of the incorpo	rator to these Articles of
Incorporation is:		0.
Sonia Livero,	Sandra	KIVERD
2750 Sw 8	7 Ave	
Migmi-Fi		

The undersigned incorporator has executed these Articles of Incorporation this day of 200

Signature

ARTICLE VI DIRECTOR(S)

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

Articles of Incorporation is (are):

Sandra Rivers (P)

Sonia Rivers (VP)

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