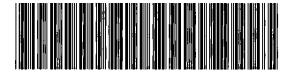
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NILLAHASSEE, FLORID.

LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

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NEW FILINGS	<u>AMENDMENTS</u>	
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ARTICLES OF INCORPORATION

O7 APR 30 AM 9:

The undersigned Incorporator(s), for the purpose of forming a $\frac{2}{2}$ 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:

C.B.A. Home Care Services, Corp.

ARTICLE II - PRINCIPAL OFFICE

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

911 500 87 Aus Sente B. Miane, FL. 33174

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:

Carmen M. Galan 911 SW 87 Aug Marie, Fr. 33174

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of
Incorporation is:
Carmen M. Coalan
and B (common
911 SW 87 AW Miawe, FL. 33174
The understand incorporator has executed these Articles of
The undersigned incorporator has executed these Articles of
Incorporation this 27 day of April 2007
Jolgaan.
Signature
Jigituaaz
ARTICLE VI- DIRECTOR(S)
The name(s) and street address (es) of the director(s) to these Articles of
Incornaration in (ana):
Carmen M. Galan, DON, RD. Ana B. Gamon, Administrator
Carmen 1. Galan, 2010, icc.
Ana B Gamon Administrator
And D. Odinon, terrino
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. Efurther
agree to comply with the provisions of all statutes related to the properand complete performance of my duties, and I am familiar with and accept the complete performance of my position as Registered Agent
obligations of my position as Registered Agent.
Soligations of my position as registered Agent. □□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□

Registered Agent-Signature