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SECRETARY OF STATE
TALLAHASSEE, FIORE

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## TRANSMITTAL LETTER

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314-6327

SUBJECT:

Enclosed are an original and one (1) copy of the Articles of Incorporation, as well as a check in the amount of \$78.75 to cover the filling fee for:

## MARILU HOME HEALTH CARE, INC.

Please process the foregoing request at your earliest convenience and return all correspondence concerning this matter to me.

Sincerely,

Date 05/05/2007

MARIA M ALONSO

3750 W 16<sup>th</sup> Avenue, Suite 142-AU

Hialeah, FL 33012

Phone: 786-326-7542

Encl.

# ARTICLES OF INCORPORATION OF

# MARILU HOME HEALTH CARE, INC.

#### ARTICLE I

The name of the Corporation is:

#### MARILU HOME HEALTH CARE, INC.

#### ARTICLE II

The Corporation may engage in or transact in any or all activity or business permitted under the Laws of the United States and of the State of Florida.

#### ARTICLE III

The Corporation is authorized to issue and have outstanding an aggregate number of FIVE HUNDRED (500) shares of one class of common stock, having a par value of ONE (\$1.00) DOLLARS per share.

This consideration to be paid for each share of stock shall be fixed by the Board of Directors.

#### ARTICLE IV

All shareholders of the Corporation shall be vested w full preemptive rights.

#### ARTICLE V

The Corporation initial Registered Agent and Principal Office in the STATE OF FLORIDA is:

INITIAL REGISTERED AGENT:

MARIA M ALONSO

INITIAL PRINCIPAL OFFICE:

 $3750 \text{ W } 16^{\text{TH}} \text{ AVENUE STE } 142\text{AU}$ 

HIALEAH, FL 33012

Having been named Initial Registered Agent to accept service of process of Corporation at the Initial Principal Office designated in these Articles of Incorporation, I hereby accept such and consent to act in this capacity and agree to comply with all the requirements of the Law pertaining thereto.

Hariat Gorso.

#### ARTICLE VI

The numbers of Directors constituting the initial Board of Directors of the Corporation is/are ONE, the number of Directors may be increased or decreased from time to time by the BY LAWS but shall never be less than ONE.

#### ARTICLE VII

The name(s) and address of the member(s) of the Initial Board of Directors is/are:

NAME

*ADDRESS* 

MARIA M ALONSO PRESIDENT

15670 NW  $41^{\rm st}$  AVENUE MIAMI, FL 33012

#### ARTICLE VIII

The name(s) and address of the Incorporator(s) executing these Articles of Incorporation is/are:

NAME

ADDRESS

MARIA M ALONSO PRESIDENT 15670 NW 41<sup>st</sup> AVENUE MIAMI, FL 33012

MARIA M ALONSO

#### ACKNOWLEDGEMENT

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

Before me, a Notary Public authorized to take acknowledgements in the STATE OF FLORIDA and COUNTY OF MIAMI-DADE, set forth above, personally appeared: MARIA M ALONSO

personally known to me and by me to be the person(s) who executed the foregoing Articles of Incorporation, and she acknowledged before me that she executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have set hereunto my hand and seal. Seal affixed in the STATE OF FLORIDA, COUNTY OF MIAMI-DADE, this 5th day of May 2007.

NOTARY PUBLIC

MY COMMISSION # DD477076 EXPIRES: January 29, 2010