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SECRETARY OF STATE

13529

COVER LETTER

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

SUBJECT: Redi-Nurse Home Health Services, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: Be	eatriz Rodriguez	e (Printed or typed)	····
:	890 SE 4 Street	Address	
-	Hialeah, FL 33010 City	, State & Zip	
]	786-499-6163 Daytime	Telephone number	

NOTE: Please provide the original and one copy of the articles.

'ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

ARTICLE I NAME

The name of the corporation shall be:

Redi-Nurse Home Health Services, Inc.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Business Address: 730 SE 8 Street, Suite# 110

Hialeah, FL 33010

Mailing Address: 890 SE 4 Street

Hialeah, FL 33010

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The power to engage in any and all lawful aspects of business.

ARTICLE IV SHARES

The number of shares of stock is:

100 shares, per value \$.01 per share, all of which will be common shares.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Beatriz Rodriguez 890 SE 4 Street Hialeah, FL 33010- President 50%

Ricardo Rodriguez 890 SE 4 Street Hialeah, FL 33010- Vice-President 50%

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Beatriz Rodriguez

890 SE 4 Street

Hialeah, FL 33010

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Beatriz Rodriguez

890 SE 4 Street

Hialeah, FL 33010

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

[3]

Signature/Incorporator

5 22 07 Date