

# P07000071595

**Florida Department of State**  
**Division of Corporations**  
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**To:**

Division of Corporations  
 Fax Number : (850) 205-0381

**From:**

Account Name : C T CORPORATION SYSTEM  
 Account Number : FCA000000023  
 Phone : (850) 222-1092  
 Fax Number : (850) 878-5926

**FLORIDA PROFIT/NON PROFIT CORPORATION**

**Bridgeport Home Health Care/Private, Inc.**

Certificate of Status	0
Certified Copy	0
Page Count	02
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## ARTICLES OF INCORPORATION

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

### ARTICLE I NAME

The name of the corporation shall be:

BRIDGEPORT HOME HEALTH CARE/PRIVATE, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:  
8663 Blue Flag Way  
Naples, FL 34109

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:  
to engage in any lawful act or activity for which corporations may  
be organized under the laws of the State of Florida.

### ARTICLE IV SHARES

The number of shares of stock is:  
100

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Jeff Baker 2200 Ross Avenue, Suite 4050, Dallas, TX 75201 Sole Director, President, Secretary

### ARTICLE VI REGISTERED AGENT

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

C T Corporation System, 1200 South Pine Island Road, Plantation, Florida 33324

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Shannon Bertino, Locke, Liddell & Sapp LLP, 2200 Ross Avenue, Suite 2200, Dallas, TX 75201

\*\*\*\*\*  
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

*Connie Bryan*

C T Corporation System

CONNIE BRYAN

SPECIAL ASSISTANT SECRETARY

Signature/Registered Agent

Date

*Shannon Bertino*

Signature/Incorporator

June 18, 2007

Date

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