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SECRETARY OF STATE TALLAHASSEE, FLORIDA

LED 282

LAZARUS CORPORATE FILING SERVICE 3320 SW 87TH AVENUE MIAMI, FL 33165

305-552-5973

CR2E031(7/97)

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Document #) (Corporation Name) (Document #) Pick up time 2.06 Walk in Certified Copy Mail out ☐ Will wait ☐ Photocopy Certificate of Status NEW FILINGS **AMENDMENTS** Profit ☐ Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/QUALIFICATION Annual Report Foreign ☐ Fictitious Name Limited Partnership Reinstatement Trademark Other

Examiner's Initials



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DIVISION OF COMPORATIONS TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

August 16, 2007

LAZARUS

SUBJECT: ACE HOME CARE CORPORATION

Ref. Number: W07000040151

We have received your document for ACE HOME CARE CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis
Document Specialist
New Filing Section

Letter Number: 707A00049952

. ARTICLES OF INCORPORATION

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

<u>ARȚICLE I NAME</u>

The name of the corporation shall be:

ACE: HOME CARE SERVICES CORPORATION

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

11865 SW 26 Street Suite G-7 Miami, Florida 33175

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Home Care Coordinator

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):

Daniel Valdes 11865 SW 26 Street, Suite G-7 Miami, Florida 33175

<u>ARTICLE VI REGISTERED AGENT</u>

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

Luis Valdes 11865 SW 26 Street, Ste. G-7 Miami, Florida 33175

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

DANIEL VALDES

11865 SW 26 Street, G-7 Miami, Florida 33175

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

Signature/Registered Agent

Signature/Incorporator

8-13-07

Date

8/18/07