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LAZARUS

CORPORATE FILING SERVICE

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MIAMI, FL 33165 (305) 552-5973	
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CORPORATION NAME(S) & DOCUMENT NUM	BER(S), (if known):
1. WURSING (Corporation Name) NURSING	S HOME
2. SERVICES COM	6 Cocument #)
3	Document #)
(Coxporation Name) (1	Occument #)
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Walk in Pick up time 2.60 Mail out Will wait - Photoe	Copy Certified Copy Copy Certificate of Status
NEW FILINGS AMEND	MENTS
Not for Profit Resi	endment gnation of R.A., Officer/Director age of Registered Agent olution/Withdrawal ger
OTHER FILINGS REGIST	RATION/QUALIFICATION
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Examiner's Initials

CR2E031(7/97)

FILED

ARTICLES OF INCORPORATION

2007 OCT -3 AM 10: 42

The undersigned Incorporator(s), for the purpose of forming a corporation under SSEE, FLORIDA the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

Quality Norsing Home Services, corp.

ARTICLE II - PRINCIPAL OFFICE

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

7101 3W 1457 Miami FC 33144

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:

Osleyda Afartinez 71015W145t Miani FL 33144

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ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

ation is: OS/Eyda MARtinez 7101 SW 1457 M'ami FL 33144

The undersigned incorporator has executed these Articles of 2 day of October 2007 Incorporation this

ARTICLE VI- DIRECTOR(S)

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

Osleyda Martinez - (P) 7101 SW 14 St MI ami FL 33144

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. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature