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FLORIDA PROFIT/NON PROFIT CORPORATION

ANCA HOME HEALTH CARE INC.

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ARTICLES OF INCORPORATION FOR ANCA HOME HEALTH CARE INC.

ARTICLE I

The name of the Corporation shall be:

ANCA HOME HEALTH CARE INC.

ARTICLE II

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

2500 N.W. 79TH AVE, Suite 226 MIAMI, Florida 33122

ARTICLE III

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

7500 SHARES

ARTICLE IV

The name and address of the initial registered agent is:

ANGEL H. CABRERA 1810 WEST 56 ST # 3217 HIALEAH, FL 33012

ARTICLE V

This corporation shall have officers and directors initially. The names and addresses of the initial officers and directors who shall hold office for the first year of the corporation, or until their successors are elected or appointed are:

CARIDAD HERNANDEZ 6980 WEST 2ND LANE HIALEAH, FLORIDA 33014

ANGEL H. CABRERA 1810 WEST 56 ST # 3217 HIALEAH, FLORIDA 33012

ARTICLE VI

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

CARIDAD HERNANDEZ 6980 WEST 2ND LANE HIALEAH, FLORIDA 33014

The undersigned has executed these Articles of Incorporation the 16th Day of January, 2008.

CARIDAD HERNANDEZ

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office / registered agent, in the State of Florida.

1. The name of the Corporation is:

ANCA HOME HEALTH CARE INC.

2. The name and address of the registered agent and office is:

ANGEL H. CABRERA 1810 WEST 56 ST # 3217 **HIALEAH, FLORIDA 33012**

SIGNATURE: CU a

President

TITLE: DATE:

January 16, 2008

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE 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 RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE: O al DATE: January 16, 2008