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FLORIDA PROFIT NON PROFIT CORPORATION

HIGH QUALITY CARE, INC

Certificate of Status	0
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2/12/2008

ARTICLES OF INCORPORATION OF

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: --

HIGH QUALITY CARE, INC

The principal place of business of this corporation shall be:

9420 WEST FLAGLER STREET # 208 - MIAMI, FLORIDA, 33174

ARTICLE IL NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

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

100 SHARES NO PAR VALUE

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is (are):

JUANA SUAREZ _- PRESIDENT- 9420 WEST FLAGLER STREET # 208
MIAMI, FLORIDA, 33174

JOSE DABUL - VICE-PRESIDENT-9420 WEST FLAGLER #208 MIAMI, FLORIDA, 33174

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

JUANA SUAREZ - PRESIDENT- 9420 WEST FLAGLER STREET #208 MIAMI, FLORIDA, 33174

JOSE DABUL- VICE-PRESIDENT - 9420 WEST flagler STREET #208
MIAMI, FLORIDA- 33174

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this, 11th day of FEBRUARY - 2008

Signature(s) of Incorporator (s)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

Pursuant to the provisions of Section 607.325. 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	corpora	ation:
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HIGH QUALITY CARE, INC

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

JUANA SUAREZ- PRESIDENT- 9420 WEST FLAGLER STREET #208

(P.O. BOX NOT ACCEPTABLE)

MIAM(, FLORIDA, 33174

(CITY/STATE/ZIP)

Signature_

Title

PRESIDENT

2008

Date FEBRUARY 11- 2008

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE_

DATE_FEBRUARY 11-