

P08000025769

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000063183 3)))



H08000063183ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.
Account Number : 120000000146
Phone : (305) 444-4994
Fax Number : (305) 444-4977

FLORIDA PROFIT/NON PROFIT CORPORATION

ST. THERESA HOME HEALTH, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

FILED
08 MAR 11 PM 4:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

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

(((H08000063183)))

ARTICLE I NAME

The name of the corporation shall be:

ST. THERESA HOME HEALTH, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4001 SW 121 AVE.

MIAMI, FL 33175

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

SHARES: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ALLYN VENTO (P/D)

4001 SW 121 AVE.

MIAMI, FL 33175

FILED
08 MAR 11 PM 4:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(((H08000063183)))

ARTICLE VI REGISTERED AGENT

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

ALLYN VENTO
4001 SW 121 AVE.
MIAMI, FL 33175

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ALLYN VENTO
4001 SW 121 AVE.
MIAMI, FL 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

03-11-08

Date



Signature/Incorporator

03-11-08

Date

FILED
08 MAR 11 PM 4:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA