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Florida Department of State

Division of Corporations Public Access System

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FLORIDA PROFIT/NON PROFIT CORPORATION

ST. CLARA HOME HEALTH AGENCY, INC.

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

ST. CLARA HOME HEALTH AGENCY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 1000 PONCE DE LEON BLVD - SUITE: 302-CORAL GABLES FL 33134

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: SHARES: 100

CORAL GABLES FL 33134

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): SANDRA ALONSO - PD 1000 PONCE DE LEON BLVD - SUITE: 302

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: SANDRA ALONSO 1000 PONCE DE LEON BLVD - SUITE: 302-CORAL GABLES FL 33134

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: SANDRA ALONSO
1000 PONCE DE LEON BLVD - SUITE: 30 2-CORAL GABLES FL 33134

~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~			****	***
Having been named as re	gistered agent to accept service of	process for the above stated	corporation at the place design	nated in this
certificate, I am familiar w	rith and accept the appointment as r	registered agent and agree to a	ect in this capacity	
~ 1				

	APRIL 28, 2008
Signature/Registered Agent	Date
	APRIL 28, 2008
Signature/Incorporator	Date

2008 APR 28 AM 10: SECRETARY OF STATE

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