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

From:
Account Name : XIOMARA LEE, P.A.
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Phone : (305) 262-2323
Fax Number : (305) 262-2324

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION

TANIA R. ORTIZ P.A.

Certificate of Status	1
Certified Copy	1
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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:

TANIA R. ORTIZ P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8535 SW 152ND AVE APT 200
MIAMI, FL 33193

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

NURSING SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

TANIA R. ORTIZ (PRESIDENT/DIRECTOR)
8535 SW 152ND AVE APT 200
MIAMI, FL 33193

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

TANIA R. ORTIZ
8535 SW 152ND AVE APT 200
MIAMI, FL 33193

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

TANIA R. ORTIZ
8535 SW 152ND AVE APT 200
MIAMI, FL 33193

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

x Tania R. Ortiz
Signature/Registered Agent

05/22/2008

Date

x Tania R. Ortiz
Signature/Incorporator

05/22/2008

Date

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