## Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)617-6381

Account Name : CSH SERVICES, LLC

Account Number : 120070000160 Phone : (800)494-3124 Fax Number : (561)455-9885

Fax Number

FLORIDA PROFIT/NON PROFIT CORPORATION

JCS HOME HEALTH, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
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Corporate Filing Menu

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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:

JCS HOME HEALTH, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3100 DEL PRADO BLVD SOUTH, STE 202 CAPE CORAL, FLORIDA 33904

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is:

DIRECTOR, PRESIDENT, SECRETARY
JOHNNY R LONG
3100 DEL PRADO BLVD SOUTH, STE 202
CAPE CORAL, FLORIDA 33904

DIRECTOR, VICE PRESIDENT
MARILYN J LONG
3100 DEL PRADO BLVD SOUTH, STE 202
CAPE CORAL, FLORIDA 33904

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SECRETARY OF STATE
TALLAHASSEE, FI ORBIA

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## ARTICLE VI REGISTERED AGENT

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

JOHNNY LONG 3100 DEL PRADO BLVD SOUTH, STE 202 CAPE CORAL, FLORIDA 33904

## ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

JOHNNY LONG 3100 DEL PRADO BLVD SOUTH, STE 202 CAPE CORAL, FLORIDA 33904

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.

JOHNW LONG / Red Stered Agent

IOHNWY LONG / Reglstered Agent

OMNY LONG Mincorporator

6-5-08

Date

6-5-08

Date