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Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION

ABSOLUTE CARE WELLEBY INC.

Certificate of Status	0
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ARTICLES OF INCORPORATION
OF

ABSOLUTE CARE WELLEY INC.

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

ARTICLE 1- NAME

The name of the corporation shall be:

ABSOLUTE CARE WELLEY INC.

The principal place of business of this corporation shall be:

**14900 SW 27TH STREET
DAVIE, FL 33331**

ARTICLE 11- 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 111- 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 1000 shares with a \$1.00 par value.

ARTICLE IV- TERM OF EXISTENCE

This Corporation is to exist perpetual.

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):

**ASHA ROBERTS
14900 SW 27TH STREET
DAVIE, FL 33331**

**NICHOLAS ROBERTS
14900 SW 27TH STREET
DAVIE, FL 33331**

ARTICLE VI- INCORPORATOR(S)

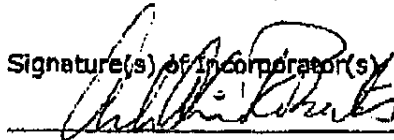
The name(s) and street address(es) of the incorporator(s) to this articles of Incorporation is (are):

**ASHA ROBERTS
14900 SW 27TH STREET
DAVIE, FL 33331**

**NICHOLAS ROBERTS
14900 SW 27TH STREET
DAVIE, FL 33331**

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this 23rd day of JANUARY 2009.

Signature(s) of Incorporator(s)



Jan 23 09 12:55p

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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 Corporation:

ABSOLUTE CARE WELLEY INC.

2. The Name and Address of the registered agent and office is:

ASHA ROBERTS
14900 SW 27TH STREET
DAVIE, FL 33331

Signature: Asha Roberts

Title: PRESIDENT

Date: 1/23/09

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 performances of my duties, and I accept the duties and obligations of section 607.325 Florida Statutes.

Signature: Asha Roberts

Date: 1/23/09