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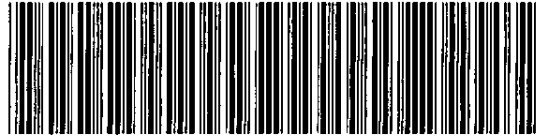
(Business Entity Name)

(Document Number)

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02/05/09--01027--011 **78.75

FILED

2009 MAR -2 P 2:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR -3 2009
D.A. WHITE

COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: J. D. M. HOME CARE, INC

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: ADVANTAGE PLUS BUSINESS SERVICES INC

Name (Printed or typed)

5640 TIMUQUANA ROAD SUITE 3

Address

JACKSONVILLE, FLORIDA 32210

City, State & Zip

904-317-5005

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 6, 2009

ADVANTAGE PLUS BUSINESS SERVICES INC
5640 TIMUQUANA ROAD SUITE 3
JACKSONVILLE, FL 32210

SUBJECT: J.D.M. HOME CARE, INC.
Ref. Number: W09000005926

We have received your document for J.D.M. HOME CARE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Signatures of the Incorporator and Registered Agent are required.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White
Regulatory Specialist II
New Filing Section

Letter Number: 409A00004330

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DEPARTMENT OF STATE
09 MAR - 2 PM 1:25

ARTICLES OF INCORPORATION

OF

J. D. M. HOME CARE , INC.

FILED

2009 MAR -2 P 2: 01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, acting as incorporator for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE I - NAME

The name of the corporation shall be: J. D. M. Home Care, Inc.

ARTICLE II – PRINCIPAL PLACE AND MAILING ADDRESS

The principal place of business and mailing address shall be 2912 NE 17th Terrace, Gainesville, Florida 32609.

ARTICLE III – PURPOSE

To offer service for a fee to the elderly and clients with developmental disabilities, and all lawful business.

ARTICLE IV – SHARES

All stock issued by the Corporation shall be common voting stock of a single class. The maximum number of shares of stock, which this corporation is authorized to have outstanding at any time is one-hundred shares having a par value of one cent (\$.01) per share.

ARTICLE V – INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and street address of the initial registered agent of the corporation shall be: Javon D. Mitchell, 2912 NE 17th Terrace, Gainesville, Florida 32609.

ARTICLE VI – BOARD OF DIRECTORS

The business of the corporation shall be managed by its Board of Directors. The initial Board of Directors shall consist of two members whose name and address is as follows:

NAME

ADDRESS

Javon D. Mitchell
President

2912 NE 17th Terrace
Gainesville, Florida 32609

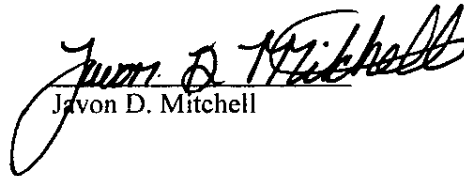
Jeanette Mitchell
VP/ Secretary

2912 NE 17th Terrace
Gainesville, Florida 32609

ARTICLE VII – INCORPORATOR

The name and street address of the incorporator for these Articles of Incorporation is:
Javon D. Mitchell, 2912 NE 17th Terrace, Gainesville, Florida 32609

The undersigned incorporator has executed these Article of Incorporation this 31st day of
January, 2009


Javon D. Mitchell

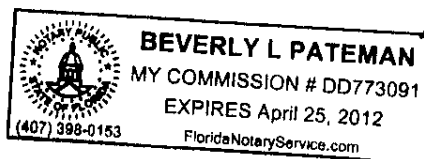
STATE OF FLORIDA

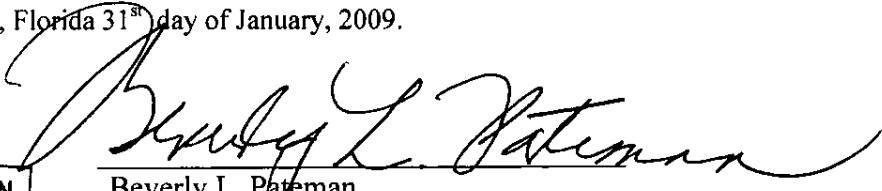
COUNTY OF DUVAL

BEFORE ME, the undersigned authority, personally appeared Javon D. Mitchell, who is
well known to be the person described in and who subscribed the above Articles of Incorporation
and he did freely and voluntarily acknowledge before me and according to the law that he made
subscribed the same for the uses and purposes therein mentioned forth.

IN WITNESS WHEREOF, I have hereunto set my hand and

Official seal Jacksonville, Duval County, Florida 31st day of January, 2009.




Beverly L. Pateman
Notary Public – State of Florida
My Commission Expires: April 25, 2012

ACCEPTANCE OF REGISTERED AGENT

The undersigned hereby accepts his designation as registered agent for
J. D. M. HOME CARE, INC.


Javon D. Mitchell

FILED
2009 MAR -2 P 2:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA