

P09000027087

(Requestor's Name)

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PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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09 MAR 23 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W09000010323

COVER LETTER

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

SUBJECT: Gifted Hands Health Services, 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: Eduardo Cascudo
Name (Printed or typed)

18314 S.W. 153 Place
Address

Miami, Florida 33187
City, State & Zip

305.510.4786
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 4, 2009

EDUARDO CASCUDO
18314 S.W. 153 PLACE
MIAMI, FL 33187

SUBJECT: GIFTED HANDS HEALTH SERVICES, INC.
Ref. Number: W09000010323

We have received your document for GIFTED HANDS HEALTH SERVICES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity must be identical throughout the document.

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) 245-6062.

Eula Peterson
Regulatory Specialist II
New Filing Section

Letter Number: 809A00007508

RECEIVED
DEPARTMENT OF STATE
09 MAR 23 PM 2:48

March 17, 2009

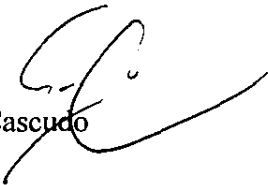
To: Florida Department of State
Division of Corporations
Attn: Eula Peterson
Regulatory Specialist II
New Filing Section

Re: Gifted Hands Health Services, Inc.
Ref: Number: W09000010323

Please see your letter attached indicating that there was an error in the documentation that I originally submitted. I have made the appropriate correction and I am re-submitting the Articles of Incorporation for your review.

Also see attached your letter allowing me to re-submit the documents within 60 days. I thank you in advance for your prompt attention to this matter.

Eduardo Cascudo

A handwritten signature in black ink, appearing to be 'Eduardo Cascudo', written over the printed name.

ARTICLES OF INCORPORATION
OF
Gifted Hands Health Services, Inc.

FILED
09 MAR 23 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, acting as incorporator of Gifted Hands Health Services, Inc. under the Florida Business Corporation Act, adopts the following Articles of Incorporation. In compliance with chapter 621, F.S.

ARTICLE I. NAME

The name of the corporation is Gifted Hands Health Services, Inc.

ARTICLE II. ADDRESS

The mailing address of the corporation is
18314 S.W. 153 Place, Miami, Florida 33187

ARTICLE III. COMMENCEMENT OF EXISTENCE

The existence of this professional corporation will commence on the date of filing of these Articles of Incorporation. The corporation is organized to engage in any activity or business permitted under the laws of the United States and Florida.

ARTICLE IV. AUTHORIZED SHARES

The maximum number of shares that the corporation is authorized to have outstanding at any time is 1,000 shares of common stock having a par value of
\$.01 per share.

ARTICLE V. DIRECTORS/OFFICERS

Eduardo Cascudo

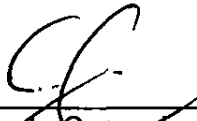
President

ARTICLE VI. INITIAL REGISTERED OFFICE AND AGENT

The street of the initial registered office of the corporation is 18314 S.W. 153 Place, Miami, Florida 33187 and the name of the corporation's initial registered agent at that address is Eduardo Cascudo

ARTICLE VII. INCORPORATOR

The name and street address of the incorporator is Eduardo Cascudo, 18314 S.W. 153 Place, Miami, Florida 33187.



Eduardo Cascudo
Incorporator

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09 MAR 23 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE DESIGNATING PLACE OR BUSINESS OR DOMICILE FOR THE SERVICES OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

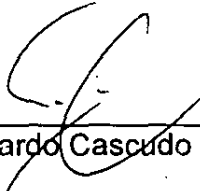
Pursuant to Chapter 49.091, Florida Statutes, the following is submitted:

Gifted Hands Health Services, Inc. desiring to organize under the laws of the State of Florida with its initial registered office as indicated in the Articles of Incorporation at 18314 S.W. 153 Place. Miami, Florida 33187, has named Eduardo Cascudo as its agent to accept service of process within this state.

ACKNOWLEDGMENT:

Having been named to accept service of process for the corporation named above, at the place designate in this certificate, the undersigned agrees to act in that capacity, to comply with the provisions of the Florida Business Corporations Act, and is familiar with and accepts, the obligations of that position.

Dated this 1st day of *March* 2009.

By: 
Name: Eduardo Cascudo

09 MAR 23 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED