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To:

Division of Corporations

Fax Number : (850) 617-6381

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I2000000146 Phone : (305)444-4994 Fax Number : (305)444-4977

FLORIDA PROFIT/NON PROFIT CORPORATION

YANDEIVI HOME HEALTH CARE, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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04/02/2009

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

ARTICLE I NAME

The name of the corporation shall be:

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YANDEIVI HOME HEALTH CARE, INC.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

4150 NW 7 ST - SUITE: 207

MIAMI FL 33126

. . .

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: SHARES: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): YANDEIVI DELGADO - PRESIDENT ARA ADAN - SECRETARY 4150 NW 7 ST - SUITE: 207 MIAMI FL 33126

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: YANDEIVI DELGADO

4150 NW 7 ST - SUITE: 207

MIAMI FL 33126

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: YANDEIVI DELGADO

4150 NW 7 ST - SUITE: 207

MIAMI FL 33126

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

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