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To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : LAW OFFICE OF RAWNY GARAY, P.A.  
Account Number : I20040000004  
Phone : (305) 373-8355  
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RECEIVED  
09 MAY 11 PM 3:21  
DIVISION OF CORPORATION

FLORIDA PROFIT/NON PROFIT CORPORATION

Betsa Home Health Care, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION  
OF  
BETSA HOME HEALTH CARE, INC.

CORPORATE NAME AND PRINCIPAL PLACE OF BUSINESS

Betsa Home Health Care, Inc.  
1802 North Alafaya Trail  
Orlando, Florida 32826

ARTICLE II  
CORPORATE EXISTENCE

The existence of the corporation shall be perpetual. Corporate existence shall begin upon the filing of the Articles of Incorporation by the Florida Department of State.

ARTICLE III  
NATURE OF CORPORATE BUSINESS

The Corporation may engage in any activity or business permitted under the laws of the United States and under the laws of the State of Florida.

ARTICLE IV  
CAPITAL STOCK

This Corporation is authorized to issue a maximum of one hundred (100) shares of stock. The shares authorized shall be common stock, having a par value of one dollar (\$1.00) per share. The consideration to be paid for each share of stock shall be fixed by the Board of Directors.

ARTICLE V  
INITIAL REGISTERED AGENT AND INITIAL REGISTERED OFFICE

The Corporation's initial Registered Agent and Registered Office in the State of Florida shall be:

Rawny Garay, Esq.  
19 West Flagler Street Suite 707  
Miami, FL 33130

**ARTICLE VI**  
**INITIAL BOARD OF DIRECTORS**

This Corporation shall have one (1) director initially. The number of directors may be either increased or decreased from time to time according to the by laws, but shall never be less than one. The name and address of the initial director of this Corporation is:

**NAME & ADDRESS**

Emilio Ramirez  
1802 North Alafaya Trail  
Orlando, Florida 32826

The members of this Board of Directors shall hold office until the first annual meeting of stockholders of the Corporation.

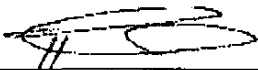
**ARTICLE VII**  
**INCORPORATOR**

The name and post office of the Incorporator executing these Articles of Incorporation is as follows:

**INCORPORATOR & ADDRESS**

Rawny Garay  
19 West Flagler Street Suite 707  
Miami, FL 33130

The undersigned, being the original subscriber to these Articles of Incorporation, for the purpose of forming a Corporation for profit and to do business both within and without the State of Florida, do hereby make, subscribe, acknowledge and file these Articles of Incorporation, hereby declaring and certifying that the facts herein stated are true and, accordingly, has hereunto set his hand and seal this 01 day of MAY, 2009.

  
\_\_\_\_\_  
Rawny Garay

STATE OF FLORIDA                     )  
  ) SS  
COUNTY OF MIAMI-DADE            )

BEFORE ME, the undersigned authority, duly authorized in the State of Florida, County of MIAMI-DADE to take acknowledgments, personally appeared **Rawny Garay**, the person described as Incorporator in the foregoing Articles of Incorporation who presented the following identification:

Personally known

WITNESS my hand and seal at Miami-Dade County, Florida this 01 day of May, 2009.



Cristiane Farina-Silvera  
Notary Public  
State of Florida

My Commission expires:

**CERTIFICATE DESIGNATING REGISTERED  
AGENT FOR SERVICE OF PROCESS**

Pursuant to Chapter 48.091, Florida Statutes, the undersigned hereby designates  
**Rawny Garay, Esq.**, as its registered Agent to accept service of process within this State.

Rawny Garay, Esq.

The undersigned hereby accepts the foregoing designation as Registered Agent for service of process within the State of Florida, and agrees to comply with the provisions of the law applicable to said designation.

Rawny Garay, Esq.

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