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(Requestor's Name)

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(City/State/Zip/Phone #)

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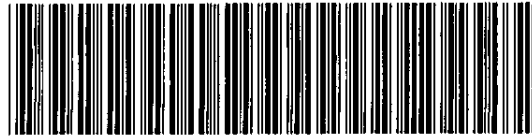
(Business Entity Name)

(Document Number)

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RECEIVED
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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2009 MAY 18 PM 4:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I. Burch MAY 19 2009

LAZARUS

CORPORATE FILING SERVICE

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MIAMI, FL 33165 (305) 552-5973

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. LEIVA RN SERVICES, INC.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time 2.00 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☒ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

ARTICLES OF INCORPORATION
OF
LEIVA RN SERVICES, INC.

THE UNDERSIGNED incorporated hereby makes, subscribes, acknowledges and files with the Department of State this corporation for profit in accordance with the law of the State of Florida.

ARTICLE I
NAME OF CORPORATION

The name of the corporation shall be:

LEIVA RN SERVICES, INC.

ARTICLE II
NATURE OF BUSINESS

The general nature of the business to be transacted by the Corporation shall be to engage in any lawful act permitted under the laws of the United States of America and of the State of Florida, as limited by the provisions of the Florida Corporation Act.

ARTICLE III
CAPITAL STOCK

The maximum number of shares of capital stock authorized to be issue by this corporation should be **ONE HUNDRED SHARES** of common stock with no par value.

Each of said shares of stock should entitle the holder to on vote at any meeting of the stockholders. All or any part of said capital stock might be paid in cash, in property (other than stock securities) or in labor or services at a fair valuation to be fixed by the incorporator. All stock, when issued, shall be fully paid for and shall be non-assessable.

ARTICLE IV
INITIAL CAPITAL

The amount of capital with which this corporation shall begin business shall be no less than **FIVE HUNDRED DOLLARS (\$ 500.00)**.

ARTICLE V
TERM OF EXISTENCE

This corporation shall have perpetual existence.

ARTICLE VI
PRINCIPLE OFFICE

The following shall be the street and principal office of this corporation, but this corporation shall have the power to move the principal office to any other address in the State of Florida, and to establish branch offices in their places of business at such other places within or without the State of Florida that may be deemed expedient:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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8903 NW 114TH STREET HIALEAH GARDENS, FL 33018

**ARTICLE VII
BOARD OF DIRECTORS**

This corporation shall have not less than one director initially. The number of director may be increased or diminished from time to time, by the By-laws adopted by the stockholders. The name and street address of the member of the first Board of Director is:

**FRANCISCO LEIVA
President & Treasurer**

**8903 NW 114th Street
Hialeah Gardens, FL 33018**

**YAHUMARA LEIVA
Vice-President & Secretary**

**8903 NW 114th Street
Hialeah Gardens, FL 33018**

**ARTICLE VIII
SUBSCRIBERS**

The name and address of the subscriber of these Articles of Incorporation, and the number of shares of stock, which they agree to take, are:

**FRANCISCO LEIVA
50 Shares**

**8903 NW 114th Street
Hialeah Gardens, FL 33018**

**YAHUMARA LEIVA
50 Shares**

**8903 NW 114th Street
Hialeah Gardens, FL 33018**

**ARTICLE IX
REGISTER AGENT**

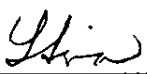
Register Agent: **YAHUMARA LEIVA
8903 NW 114th Street
Hialeah Gardens, FL 33018**

**ARTICLE X
AMENDMENT**

These articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the stockholders, and approved at the stockholder's meeting by a majority of the stock entitled to vote thereon, unless all the directors and all the stockholders sign a written statement manifesting their intention that a certain amendment of theses Articles of Incorporation be made.

IN WITNESS WHEREOF, the undersigned has hereunto set their hands and seal this 15th day of May, 2009.


FRANCISCO LEIVA


YAHUMARA LEIVA

**STATE OF FLORIDA
COUNTY OF DADE**

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgments, personally appeared **FRANCISCO LEIVA and YAHUMARA LEIVA**, known to be the person described as subscriber in and who executed the foregoing Articles of Incorporation, and acknowledged before me that they subscribed to those Articles of Incorporation.

IN WITNESS THEREOF, I have hereunto set my hand and seal,
This 15th day of May, 2009.

Notary Public
Personally Known

**CERTIFICATE DESIGNATING PLACE OF
BUSINESS OR DOMICILE FOR THE SERVICE
OF PROCESS WITHIN THIS STATE, NAMING
AGENT UPON WHOM PROCESS MAY BE VERIFIED**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said Act:

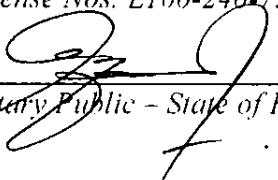
That **LEIVA RN SERVICES, INC.**, desiring to organize under the laws of the State of Florida, with its principal office at **8903 NW 114th Hialeah Gardens, FL 33018**, County of Miami-Dade, has named **YAHUMARA LEIVA** as its agent service of process within this State.

ACKNOWLEDGMENT:

Having been named to accept service of process for the above stated people, at the place designated in this Certificate, the undersigned hereby agrees to act in this capacity and agrees to comply with the provisions of said Act relative to keeping open said office.


YAHUMARA LEIVA

Sworn and subscribed this 15th day of May, 2009 by Mrs. Francisco Leiva and Yahumara Leiva, who personally appears before me and presented theirs Florida Drivers License Nos. L100-240-73-189-0 and L100-960-70-756-0 as identification.


Notary Public - State of Florida

My Commission Expires:

