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**FLORIDA PROFIT/NON PROFIT CORPORATION  
PROFESSIONAL TOUCH CARE, INC.**

Certificate of Status	0
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SECRETARY OF STATE  
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## ARTICLES OF INCORPORATION

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

### ARTICLE I - NAME

The name of the corporation shall be:

Professional Touch CARE, INC.

### ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

7045 SW 83 Pl

Miami FL 33143

### ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

### ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Belkys Leyva

7045 SW 83 Pl

Miami

FL 33143

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA


**ARTICLE V - INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation is:

Belkys Leyva  
7045 SW 83 Pl  
Miami FL 33143

The undersigned incorporator has executed these Articles of Incorporation this

13 day of Sept 20 11.

  
Signature

**ARTICLE VI - DIRECTOR (S)**

The name(s) and street address (es) of the director(s) to these Articles of  
Incorporation is (are):

(P) Belkys Leyva  
7045 SW 83 Pl  
Miami  
FL 33143

**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT**  
**/REGISTERED OFFICE**

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

  
Registered Agent Signature

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