

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION MI OTRO HOGAR ADULT DAY CARE CENTER, INC.

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H 1 2 0 0 0 0 0 5 2 14 ARTICLES OF INCORPORATION

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:

Mi Otro Hogar Adult Day Care Center, Inc.

ARTICLE II - PRINCIPAL OFFICE

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

8861 S. W. 17th Street, Miami, Florida 33165

ARTICLE III - SHARES

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

100 shares

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Mirian E. Dominguez 8861 S. W. 17th Street Miami, Florida 33165

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ARTICLE V - INCORPORATOR

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

Mirian E. Dominguez 8861 S. W. 17th Street Miami, Florida 33165

The undersigned incorporator has executed these Articles of Incorporation this

6th day of January 2012

ARTICLE VI- DIRECTOR (S)

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

Mirian E. Dominguez, 8861 S. W. 17th Street, Miami, F1 33165

VP) Eva Gonzalez, 8861 S. W. 17th Street, Miami, F1. 33165

Julia Benavides, 995 S. W. 84th Ave, @120, Miami, F1. 33144

Mario P. Miro, 8861 S. W. 17th Street, Miami, F1. 33165

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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