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To:			ł
	Division of Corporations		
	Fax Number : (850)617-6381	• •	ĺ
From:		•	
ි From:	Account Name : LAZARUS CORPORA	TE FILING SERVICE, INC ##	
	Account Number : I20000000019	The state of the s	55
CL_	Phone : (305)552-5973		늘 -
	Fax Number : (305)675-5944	र्रोहर (1911) विकास सम्बद्ध	_
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***Enter the	email address for this business e	ntity to be used for future	3
	report mailings. Enter only one e		I
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FLORIDA PROFIT/NON PROFIT CORPORATION LOS RANCHOS HOME CARE INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

ARTICLES OF INCORPORATION	H15000186075
In compliance with Chapter 607 and/or Chapter 621, F.S. (Pr	

ARTICLE I NAME: The name of the corporation is: -05 RANGLOS HOME CALE II	no
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
MIANI FT 93170	
ARTICLE III SHARES: The number of shares of stock is:	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
BAISH ECLEVANNIA (P)	
	, , , , , , , , , , , , , , , , , , ,
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is:	11
Raisa Echevarria	つ
19301 SW 218 ST 28 29 Miami FL 33170	
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:	
Raisa Echevarria	
19301 SW 218 ST	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

Required Signatures:

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

T 31 15

Registered Agent Uate

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$.817.155, F.S.

Irigorporator