lorida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

Fax Number

: (305)552-5973 : (305)675-5944

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Email	Address:							_

I'LORIDA PROFIT/NON PROFIT CORPORATION L&D OCEAN HOME HEALTH CARE CORP

Certificate of Status	0
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Electronic Filing Menu,

Corporate Filing Menu

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LAZARUS CORPORATE

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	ARTICLE I NAME: The name of the corporation is:	
(S)	OCEAN HOME HEALTH CARE	
	ARTICLE II PRINCIPAL OFFICE; CORP	-
	The principal street address and mailing address is:	
	4100 NW 196 ST , NIAMI GARDENS	
	FC. 33055	
<u>ARTICL</u>	E JII SHARES: The number of shares of stock is:	
<u> </u>	ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS;	19
	PAYAN JOUVE ROMEN (P)][][
<i></i>	AMER CUE SOTO (P)	0
		P R
		E 6:
		ప
		
ላ ውሞነሪ	THE VICTOR DECORPORATE	
	CLEV INTUAL REGISTERED AGENT AND STREET ADDRESS;	
	te and Florida street address (PO Box not acceptable) of the registered agent is:	
	100 NW 196 ST, NIAMI BARDENS	
	F.L . 33055	
	LEVI INCORPORATOR: The name and address of the Incorporator is:	
	AVAN JOUVE ROMEU	
	AVIER CUE SOTO	
41	100 NW 196 ST	
M	11700 NW 196 ST	



Required Signatures:

Having been named as registered agent to accept corporation at the place designated in this certific appointment as registered agent and a	eate, I am familiar with and accept the
Registered Agent	Date
I submit this document and affirm that the facts stathe false information submitted in a document to the third degree felony as provided for in 5,817,155, F.S.	he Department of State constitutes a
[6COLDQL810]	Date

SLOWE LARY OF STATES.

JIVISION OF CORPORATION.

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