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LAZARUS CORPORATE INDUS	STRIES, INC.		
(Requestor's Name) 890 S.W. 87 AVENUE #16		•	Such But 4 demonstration
Address) MIAMI, FLORIDA 33174 (305)552-5973			5:00 10:00 1.4 5:13 3:5:8; -03/24/95: -01006008 ++++122.50
(City, State, Zip) (Pho LOCAL REPRESENTATIVE TA	ne#) Allahassee		
(904)385-6735		OFFICE USE ONLY	
CORPORATION NAME(S) &			
1. P PLUS (Corporation Name)	Home H	EALTH	INC
2		(Document #)	
(Corporation Name) 3.		(Document #)	
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(Corporation Name) Walk in Pick up time Mail out Will wait	2,00 Photocopy	(Document #) Certified Co	•
NEW FILINGS	AMENDME	unc	1 :
Profit	Amendment	113	
NonProfit	Resignation of R.A	Others/Director	
Limited Liability	Change of Registers		5 E O
Domestication	Dissolution/Withdra		
Other	Merger		C TO FOURTH
OTHER FILNGS	REGISTRATION/		4:
Annual Report	QUALIFICATION		
Fictitious Name	Foreign		
Name Reservation	Limited Partnership		
	Reinstatement	1	

Trademark

Examiner's Initials

Other

CR2E031(9/92)

ARTICLES OF INCORPORATION

OF

A PLUS HOME HEALTH, INC.

- I NAME: The name of this corporation is:
 A PLUS HOME HEALTH, INC.
- II DURATION: This corporation shall have perpetual existence, unless sooner dissolved in accordance with the laws of the State of Florida.
- III PURPOSE: This corporation is organized for the purpose of transacting any and all business permitted under the laws of the United States and of the State of Florida.
- IV CAPITAL STOCK: This corporation is authorized to issue
 ----SIX HUNDRED---- (600) shares of ---NO-- par
 value

common stock, which shall be designated "Common Stock

V - PREEMPTIVE RIGHTS: Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others. VI - INITIAL PRINCIPAL OFFICE, MAILING ADDRESS AND INITIAL REGISTERED OFFICE AND AGENT:

The street address of the initial principal and registered office of this Corporation is:

221 S.W. 22ND AVENUE, STE 253 - MIAMI, FL 33135 and the name of the initial registered agent of this Corporation at that address is:

VII - INITIAL BOARD OF DIRECTORS:

The Corporation shall have ---THREE (03)--- director (s) initially. The number of directors may be either increased or diminished from time to time by the bylaws but shall never be less than ONE (01).

The name(s) and address(es) of the initial director(s) of this Corporation is (are):

MIRALYS L. VAZQUEZBELLO	3125 N.W. 24TH AVENUE
\President - 33.33%	Miami, Fl 33142
RICHARD MANTRANA	3125 N.W. 24TH AVENUE
\Vice-President - 33.33%	Miami, Fl 33142
JESUS D. VAZQUEZBELLO	3125 N.W. 24TH AVENUE
\Secretary-Treasurer -	Miami, Fl 33142
33.33%	

VIII - INDEMNIFICATION:

The Corporation shall indemnify any officer or director, or any former officer of director, to the full extent permitted by law.

- INCORPORATOR: The name(s) and address(es) of the person(s) signing those articles is (are):

MIRALYS L. VAZQUEZBELLO	3125 N.W. 24TH AVENUE
RICHARD MANTRANA	Miami, F1 33142 3125 n.w. 24TH AVENUE
JESUS D. VAZQUEZBELLO	Miami, Fl 33142 3125 N.W. 24TH AVENUE Miami, Fl 33142

IN WITNESS WHEREOF, the undersigned subscriber(s) has (have) executed these articles of incorporation this -15th- day of ----MARCH-----, 1995.

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THE STATE OF FLORIDA, NAMING AGENT UPON WHOM SERVICE OF PROCESS MAY BE EFFECTIVE.

In compliance with Section 607.034 of the Florida Statutes, the following is submitted:

A PLUS HOME HEALTH, INC.

desiring to organize or qualify under the laws of the State of Florida, with its principal place of business in the City of ----- MIAMI-----, County of --DADE---, State of Florida, has named: MIRALYS L. VAZQUEZBELLO------located at

221 S.W. 22ND AVENUE, SUITE 253 - MIAM1, FL 33135

City of ----MIAMI----, County of --DADE---, State of Florida

as its agent to accept service of process within the State of
Florida.

ACKNOWLEDGEMENT

Having been named to accept service of process for the above mentioned Corporation, at the place designated in this Certificate, I hereby agree to act in this capacity, and further agree to comply with the provissions of all Statutes relative to the proper and complete performance of my duties.

Dated this --15TH-- day of ----- MARCH-----, 1995.

Resident and registered egent