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	ME(S) & DOCUMENT NUME		
1. <u>PNGC</u> (Сопрева	LICA HOME H	(Document 8)	RE, INC.
(Corpora	liens Nama)	(Document #)	
3. (Corporat	ton Name)	(Document #)	<del></del>
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[] · · · · · · ·		Certificate of Status	1 (a) 2 (a)
NEW FILINGS	AMENDMENTS		7.5 10 Au
Profit	Amendment		$\mathbb{R} \otimes \mathbb{R}$
NonProfit	Resignation of R.A., Officer/D	irector	
Limited Liability	Change of Registered Agent		\$ 6 A
Domestication	Dissolution/Withdrawal		
Other	Merger		
OTHER FILINGS	REGISTRATION/ QUALIFICATION		
Annual Report	Foreign		
Fictitious Name	Limited Partnership		
Name Reservation	Reinstatement		1, 4-24

Examiner's Initials

Trademark

Other

CR2D031(10/92)

### ARTICLES OF INCORPORATION

SECRETARY OF STATE DIVISION OF CORPORATIONS

95 APR 26 PH 2: 11

#### ANGELICA HOME HEALTH CARE, INC.

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

#### ARTICLE I. MANE

The name of the corporation shall be:

ANGELICA HOME HEALTH CARE, INC.

The principal address of this corporation shall be:

321 EAST 6TH STREET, APT. 213, HIALEAH, FLORIDA 33010

#### ARTICLE II. HATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities for business permitted under the laws of the United States, the State of Florida or any other State, Country, Territory or Nation.

#### ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares of common stock at a par value of \$1.00 per share.

#### ARTICLE IV. ADDRESS

#### ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

#### ARTICLE VI. SPECIAL PROVISION

This Corporation shall have Officer (s) and Director (s), initially. The name and street address of the initial Officer (s) and Director (s) who shall hold office for the first year of the corporation, of until his successor is elected or appointed are/is:

JOHNNY ORTIZ- 321 EAST 6th STREET, APT 213, HIALEAH, FL 33010

#### ARTICLE VII. SUBSCRIBER

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

JOHNNY ORTIE 321 EAST 6th STREET, APT 213 MIALBAN, FL 33010

In WITMESS WHEREOF, the undersigned has hereunto set his/her hand and seal on this 17 day of MARCH , 1995.

\_ (SEAL)

Certificate designated place of business or domicile for the service of process within Florida, naming agent upon whom process may be served.

First that	ANGELICA HOME HEALT	H CARE, INC.
<u> </u>	(NAME OF CORPO	PRATION)
Desiring to orga Florida, with it HIALEAH ( CITY)	nize or qualify under t s principle place of busi	he laws of the State of ness at city of
State of <u>Flori</u> (STAT	da_, has namedJC E) (NAME OF	HNNY ORTIZ RESIDENT AGENT)
	EAST 6th STREET, APT 213 (STREET ADDRESS AND NUM ST OFFICE BOX ADDRESSES A	(BER OF BUILDING)
City of HIAL (CI	<u>.EAH</u> , State of Florid TY)	a, as its agent to accept
services of proc	ess within florida.	A Lt
	SIGNATURE	(CORPORATE OFFICER)
	TITLE	PRESIDENT
	DATE	MARCH 17, 1995

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

SIGNATURE

DATE

# SECRETARY OF STATE DIVISION OF CORPORATIONS 95 APR 26 PH 2: 11

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/agent, in the State of Florida.

The na	me of the Corporation is:
	ANGELICA HOME HEALTH CARE, INC.
The na	me and address of the registered agent and office is:
<del></del>	JOHNNY ORTIZ
	(NAME)
321 E	AST 6 STREET, APT. 213 (P.O. BOX NOT ACCEPTABLE)
HIALEA	H, FLORIDA 33010
GNATURE .	(CITY/STATE/ZIP CODE) CORPORATE OFFICER) PRESIDENT
TE	MARCH 17, 1995
ocess for is certient and the the projects of the project of the projects of the project	in named as registered agent and to accept service of the above stated corporation at the place designated in ficate, I hereby accept the appointment as registered agree to act in this capacity. Further agree to comply provisions of all statutes relating to the proper and performance of my duties, and I am familiar with and obligations of my position as registered agent.
re .	MARCH 17, 1995