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DEPARTMENT OF STATE
STATE OF FLORIDA
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FROM: EMPIRE CORPORATE KIT COMPANY
1492 W FLAGLER ST
SUITE 200
MIAMI FL 33135- 94801-0000
CONTACT: RAY STORMONT
PHONE: (305) 541-3894
FAX: (305) 541-3770

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DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
NAME: HOME CARE ENTERPRISES, INC.
FAX AUDIT NUMBER: H95000005055
DATE REQUESTED: 05/04/1995
CERTIFIED COPIES: 1
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ARTICLES OF INCORPORATION

(5)

OF

HOME CARE ENTERPRISES, INC.

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, do hereby adopt the following articles of incorporation:

ARTICLE ONE
NAME

The name of the corporation is **HOME CARE ENTERPRISES, INC.**

95 MAY -5 PM 1:

ARTICLE TWO
CORPORATE DURATION

The duration of the corporation is to be perpetual.

ARTICLE THREE
PURPOSE

The corporation may engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE FOUR
CAPITALIZATION

The aggregate number of shares which the corporation is authorized to issue is 10,000 shares. Such shares shall be of a single class, and shall have a par value of One Dollar ($1.00) per share.

ARTICLE FIVE
PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be 2514 Hollywood Boulevard, Suite 502, Hollywood, Florida 33020.

ARTICLE SIX
REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the corporation is 2514 Hollywood Boulevard, Suite 502, Hollywood, Florida 33020, and the name of its initial registered agent at such address, is Carlos A. Rodriguez.

JOSE R. PUJOLS, ESQ.
2701 SW LEJEUNE RD. #401
CORAL GABLES, FL 33134
(305) 569.9533
FL. Bar NO. 936911

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ARTICLE SEVEN
DIRECTORS

The number of directors constituting the initial board of directors of the corporation shall be not less than One (1). The name and address of each person who is to serve as a member of the initial board of directors is:

Name	Address
Carlos Rodriguez	2514 Hollywood Blvd., Suite 502 Hollywood, Florida 33020
Bonnie L. Willey	2514 Hollywood Blvd., Suite 502 Hollywood, Florida 33020
Kathleen Danlar	2514 Hollywood Blvd., Suite 502 Hollywood, Florida 33020
Dennis Lopez	2514 Hollywood Blvd., Suite 502 Hollywood, Florida 33020

ARTICLE EIGHT
INCORPORATORS

The name and address of each incorporator is:

Name	Address
Carlos Rodriguez	2514 Hollywood Blvd., Suite 502 Hollywood, Florida 33020

ARTICLE NINE
INDEMNIFICATION

This corporation shall indemnify and may insure its officers and directors to the fullest extent permitted by law.

ARTICLE TEN
AMENDMENTS

These articles of incorporation may be amended in the manner authorized by at the time of amendment.

IN WITNESS WHEREOF, I, Carlos Rodriguez, being the incorporator of this corporation, make and file these articles of incorporation this 3rd day of May, 1995.

Carlos A. Rodriguez

CERTIFICATE DESIGNATING PLACE OF BUSINESS FOR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

THAT HOME CARE ENTERPRISES, INC., DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT:

2514 Hollywood Boulevard
Suite 502
Hollywood, Florida 33020

HAS NAMED CARLOS A. RODRIGUEZ, LOCATED AT 2514 Hollywood Boulevard, Suite 502, Hollywood, Florida 33020, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

Carlos A. Rodriguez, Incorporator

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THE CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

By:
Carlos A. Rodriguez

95 MAY -5 AM 8:

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

P95000035333

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
96 OCT -2 PM 3:35

APPLICATION FOR REINSTATEMENT

DOCUMENT # P95000035333

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-10/17/96--01022--016
****383.75 ****383.75

1 Corporate Name

HOME CARE ENTERPRISES, INC.

Principal Place of Business
2514 Hollywood Blvd.
Suite 308
Hollywood, Florida 33020

Mailing Address
Same

DO NOT WRITE IN THIS SPACE

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2 New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip | Country

3 New Mailing Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip | Country

4 Date Incorporated or Qualified To Do Business in Florida: 05/05/1995

5 FEI Number: 65-0590013 | Applied For | Not Applicable

6 CERTIFICATE OF STATUS DESIRED ☒ $8.75 Additional Fee required for a Certificate of Status.

7 Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P/D	Carlos A. Rodriguez	2514 Hollywood Blvd. Suite 308	Hollywood, Fl 33020
VP/D	William Danker	2514 Hollywood Blvd. Suite 308	Hollywood, Fl 33020
S/D	Catalina Rugama	2514 Hollywood Blvd. Suite 308	Hollywood, Fl 33020

REINSTATEMENT 96 OCT

8 Name and Address of Current Registered Agent

Carlos A. Rodriguez
2514 Hollywood Blvd.
Suite 308
Hollywood, Florida 33020

9. Name and Address of New Registered Agent

Name: JOSE R. PUJOLS ESQ
Street Address (P.O. Box Number is Not Acceptable): 2701 LeJeune Road
Suite, Apt. #, Etc.: Suite 401
City: Coral Gables | State: FL | Zip Code: 33134

10 I being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Jose R. Pujols | Date: 10-1-96

REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐ (See other side for information on intangible tax.)

12 I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I realize the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. The information furnished on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Carlos A. Rodriguez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 10-1-96 | Daytime Phone #: 925-0818

CR2E043 (12/95)