P95006053

January 25th., 1995

RAMBOW CARETAC 12714 W. DIXIC AUY \$106. MIAMI TH 33161

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RE: RAINBOW CARE INC.,

Dear Sir/Madam:

Enclosed is an original and one (1) copy of the Articles of Incorporation for the above referenced corporation, a domestic profit corporation, and a money order in the amount of \$122.50 representing the payment of the following fees:

Filing Fees \$ 35.00
Registered Agent
Designation 35.00
Certified Copies 52.00

\$ 122.50

Very truly yours,

urs.

Musles Jandres Gomez

FILED

95 AUG II AM 9:3

SECRETARY OF STATE
FLORIDA

TE BROWN AUG 1 1 1995



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Socretary of State

February 2, 1995

ANDRES GOMEZ RA!NBOW CARE INC. 12215 W. DIXIE HIGHWAY, SUITE 106 MIAMI, FL 33161

SUBJECT: RAINBOW CARE INC. Ref. Number: W95000002387

We have received your document for RAINBOW CARE INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to section 607.0202(1)(b) or 617.0202(1)(b), Florida Statutes, you must list the corporation's principal office, and if different, a mailing address in the document. If the principal address and the registered office address are the same, please indicate so in your document.

The entity name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved entity. Names of administratively dissolved entities are not available for one year from the date of administrative dissolution unless the dissolved entity provides the Department of State with a notarized affidavit executed as required by section 607.0120, 617.01201, 608.5135 or 608.4482 Florida Statutes, permitting the immediate assumption or use of the name by another entity.

Simply adding "of Florida" or "Florida" to the end of a name does not constitute a difference.

When the document is resubmitted, please return a copy of this letter to ensure proper handling.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6932.

Teresa Brown Corporate Specialist

Letter Number: 695A00004448



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

March 7, 1995

ANDRES GOMEZ PRISMA CARE INC. 12215 W. DIXIE HIGHWAY, SUITE 106 MIAMI, FL 33161

SUBJECT: PRISMA CARE INC. Ref. Number: W95000002387

We have received your document for PRISMA CARE INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You falled to make the correction(s) requested in our previous letter.

According to section 607.0202(1)(b) or 617.0202(1)(b), Florida Statutes, you must list the corporation's principal office, and if different, a mailing address in the document. If the principal address and the registered office address are the same, please indicate so in your document.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6932.

Teresa Brown Corporate Specialist

Letter Number: 695A00010011



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 5, 1995

ANDRES GOMEZ PRISMA CARE INC. 12215 W. DIXIE HIGHWAY, SUITE 106 MIAMI, FL 33161

SUBJECT: PRISMA CARE INC. Ref. Number: W95000002387

We have received your document for PRISMA CARE INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

The registered agent and registered office listed in your articles of incorporation must be consistent throughout the document.

A corporation may not serve as its own registered agent. Please designate an individual, another active domestic corporation, or a foreign corporation authorized to transact business within this state, having a Florida street address identical with that of the registered office.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6932.

Teresa Brown Corporate Specialist

Letter Number: 795A00032488



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 25, 1995

ANDRES GOMEZ PRISMA CARE INC. 12215 W. DIXIE HIGHWAY, SUITE 106 MIAMI, FL 33161

SUBJECT: PRISMA CARE INC. Ref. Number: W95000002387

We have received your document for PRISMA CARE INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6932.

Letter Number: 895A00035226

Teresa Brown Corporate Specialist

ARTICLES OF INCORPORATION

OF

PRISMA CARE INC.



The undersigned incorporator(s), for the purposes of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: PRISMA CARE INC.

The principal place of business of this corporation shall be:

12215 West Dixie Highway Suite #106 North Miami, FL 33161

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or 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 aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: Five Hundred Shares (500) with One Dollar (\$1.00) par value per share

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

ANDRES GOMEZ 12215 West Dixie Highway Suite 106 North Miami, FL 33161

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

ANDRES GOMEZ 12215 We it Dixio Highway Suite 105 North Miami, FL 33161

IN WITNESS V	WHEREOF, the u	indersigned	incorporator(s)	has(have)	executed these
Articles of	Incorporation	this <u>-</u>	day of	7014	, 19 <u>95</u> ;

Signature(s) of Incorporator(s)

Coudes Somes

STATE OF FLORIDA COUNTY OF DADE

THE FOREGOING instrument was acknowledged and sworn to before me this 3/.

day of 10/4 , 19 9/7 , by ANDRES GOMEZ of PRISMA CARE INC. and who has produced Florid Driver License. as identification and who did (did not take an oath.

NOTARY PUBLIC STATE OF FLORIDA

MY COMMISSION EXPIRES

CERTIFICATE OF DESIGNATION REGISTERED AGENT/PEGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:	PRISMA	CARE	INC.
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2.	The	name	and	address	of	the	registered	agent	and	office	is:
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ANDRES GOMEZ 12215 West Dixie Highway Suite 106 North Miami, FL 33161

Signature Links Struct

Corporate Officer

Title President / Registate & Agent

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, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

Signature	Chudres	Amery.
Signavare		
Date	07/31/95.	