

P95000070399

Jacob J. Linhart, P.A.

15505 BULL RUN ROAD, #255
MIAMI LAKES, FLORIDA 33014

Jacob J. Linhart
Attorney at Law

Telephone (305) 825-0550
Fax (305) 825-4333

September 8, 1995

Florida Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Re: SPECIAL NEEDS HOME CARE SERVICES, INC.

Dear Sirs:

Enclosed please find a Articles of Incorporation for the above Corporation, as well as our client's check in the amount of \$122.50, to cover your costs for filing same.

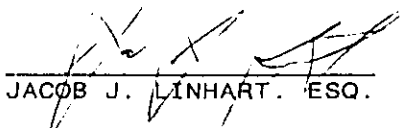
Kindly provide the undersigned with a certified copy of said Articles as soon as possible.

Thank you in advance for your kind cooperation.

Should you have any questions, or if we can be of any assistance, please feel free to contact the undersigned.

Very truly yours,

JACOB J. LINHART, P.A.


JACOB J. LINHART, ESQ.

4000001581954
-09/12/95--01006--005
****122.50 ****122.50

SEP 13 1995

**ARTICLES OF INCORPORATION OF
SPECIAL NEEDS HOME CARE SERVICES, INC.**

The undersigned, for the purpose of forming a Corporation under the Florida General Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE ONE

The name of the Corporation is SPECIAL NEEDS HOME CARE SERVICES, INC.

ARTICLE TWO

The term of existence of the Corporation is perpetual.

ARTICLE THREE

The Corporation may transact any and all lawful business for which Corporations may be incorporated under the Florida General Corporation Act.

ARTICLE FOUR

The minimum number of shares of stock that this Corporation is authorized to issue and have outstanding at any one time is one hundred (100) shares of common stock at one dollar (\$1.00) par value.

ARTICLE FIVE

The street address of the principal office of the Corporation is as follows:

1110 Northeast 163rd Street, Suite 202
North Miami Beach, Florida 33162

its mailing address and initial registered office are as follows:

1110 Northeast 163rd Street, Suite 202
North Miami Beach, Florida 33162

The name of the initial registered agent at that address is JOANNE SPRING.

ARTICLE SIX

The Board of Directors of the Corporation shall consist of ONE (1) or more members, as may be provided in the By-Laws. The names and addresses of the members of the first Board of Directors are as follows:

Name	Address
JOANNE SPRING	1110 Northeast 163rd Street, Suite 202 North Miami Beach, Florida 33162

ARTICLE SEVEN

The names and addresses of the Incorporators are as follows:

<u>Name</u>	<u>Address</u>
JOANNE SPRING	1110 Northeast 163rd Street, Suite 202 North Miami Beach, Florida 33162

ARTICLE EIGHT

The percentage of stock of the Corporation as issued to the shareholders is as follows:

JOANNE SPRING	100%
---------------	------

**ARTICLE NINE
DESIGNATION OF REGISTERED AGENT**

I hereby accept Designation as Registered Agent for SPECIAL
NEEDS HOME CARE SERVICES, INC.

Joanne Spring
JOANNE SPRING

IN WITNESS WHEREOF, we have hereby subscribed our hands and
seals this 7th day of September, 1995.

Joanne Spring
JOANNE SPRING

CERTIFICATION

STATE OF FLORIDA)
COUNTY OF DADE)

Before me, the undersigned authority, duly authorized to
administer oaths, personally appeared JOANNE SPRING, to me
personally known, or who identified themselves to me by showing

Drivers License as identification, and who
acknowledged that they executed these Articles of Incorporation for
the purposes contained therein

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal
this 7 day of September, 1995.

Susan S. Block
NOTARY PUBLIC

My Commission Expires:



SUSAN S. BLOCK
COMMISSION # CC 356420
EXPIRES MAR 27, 1998
BONDED THRU
ATLANTIC BONDING CO., INC.

THIS INSTRUMENT PREPARED BY:
JACOB J. LINHART, P.A.
15505 BULL RUN ROAD, #255
MIAMI LAKES, FLORIDA 33014
(305) 825-6556