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TRANSMITTAL LETTER

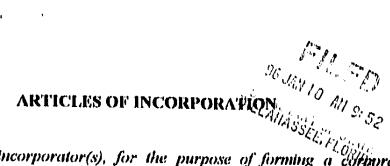
Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	CARE-		wc.	
	(Proposed corpora	ato namo - mus	t include suffix)	

Enclosed is an origina	il and one (1) co	py of the articles o	of Incorporation	and a chec	:k
for : 70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Cop	\$131.25 Filing Fee, Certified Copy & Certificate	TALL))
FROM:	Carol Name	Ann Ra printed or typed)	gone	ASSEE FLOOR	о (1986) Стан
	MIAM	Address // FL // State & Zip	33/6/	DA N	J
	305	893 S Telephone number	730 -11	000016 /10/9601 ****78.75	584319 067011 *****78.75

SN JAN 1 2 1996

NOTE: Please provide the original and one copy of the articles.



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

ARTICLE 1 - NAME

The name of the corporation shall be:

CARE - USA, Inc.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

11625 Griffing Boulevard North Miami, Florida 33161

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One Thousand (1,000)

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Carol Ann Ragone 11625 Griffing Boulevard, North Miami, Florida 33161

ARTICLE V - INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) of these Articles of Incorporation is(are):

Carol Ann Ragone 11625 Griffling Boulevard North Miami, Florida 33161

this		January	, 1996.
	Caroli	Signature Signature	******
		Signature	
	•	Signature	

designation of officers.

CERTIFICATE OF DESIGNATION OF 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/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

CARE - USA, Inc.

2. The name and address of the registered agent and office is:

Carol Ann Ragone 11625 Griffing Boulevard North Miami, Florida 33161 OS JAN 10 MI S. 52

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Jantura (ONC

Date

DIVISION OF CORPORATIONS PO Box 6327, TALLAHASSEE, FL 32314