

Joseph C. Ferraro.

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NY 24-96

SECRETARY OF STATE  
STATE OF FLORIDA  
TALLAHASSEE, FLA. 32301

ATTENTION: CORPORATE DIVISION

**RE:**

TO WHO IT MAY CONCERN:

Enclosed is the executed original and copy of  
the Articles of Incorporation of this proposed corporation.

Please endorse your approval of the Articles of Incorporation on the executed copy and return it to me.

Enclosed is a check for \$122.50 in payment of the following costs:

Filing Fee

\$ 35.00

Certified Copy

\$ 52.50

Registered Agent  
Designation

\$ 35.00

TOTAL:

§ 122.50

Sincerely yours,

JOSEPH A. FERRARA

JAF/rf  
Enc.

MAR 8 1996 MSB

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96 MAR -6 PM 3:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

OF

*ABBA HOME HEALTH CARE*

FILED

96 MAR -6 PM 3:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned subscriber to these Articles of Incorporation is a natural person competent to contract and does form a corporation under the laws of the State of Florida.

ARTICLE I

The name of the corporation is *ABBA HOME HEALTH CARE CORP*

ARTICLE II

The location of its principal office in the State of Florida is *3121 PONCE DE LEON BLVD, CORAL GABLES, FLA 33134* but it shall have the power to establish and maintain branch offices at such cities and towns in the State of Florida and the United States or foreign countries as said corporation may from time to time determine.

ARTICLE III

The corporation may engage in any activity or business permitted under the laws of the United States, State of Florida or foreign country.

#### ARTICLE IV

The authorized capital stock of this corporation shall be One Hundred (100) Shares of Common Stock having a par value of ~~7~~<sup>5.00</sup>/<sub>17</sub> per share.

#### ARTICLE V

The corporation is to exist perpetually.

#### ARTICLE VI

The capital with which this corporation shall begin business is FIVE HUNDRED DOLLARS (\$500.00) or any amount in excess thereof.

#### ARTICLE VII

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

*BENITO A. FERNANDEZ  
3121 PONCE DE LEON BLVD  
CORAL GABLES, FLORIDA 33134*

#### ARTICLE VIII

This corporation shall have (1) Director initially. The number of Directors may be increased or diminished from time to time by By-Laws adopted by the Stockholders. None of the Directors shall be required to be Stockholders or a resident of the State of Florida.

#### ARTICLE IX

The names and post office addresses of the members of the First Board of Directors and Officers is :

*BENITO A. FERNANDEZ : PRESIDENT-DIRECTOR  
DOLORES T. FERNANDEZ, TREASURER-SECRETARY  
3121 PONCE DE LEON BLVD DIRECTOR  
CORAL GABLES, FLORIDA 33134*

#### ARTICLE X

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the Stockholders and approved by the Stockholders' meeting by a majority of the Stockholders entitled to vote thereon, unless all the Directors and all the Stockholders sign a written statement manifesting their intention that a certain amendment of the Articles of Incorporation be made.

#### ARTICLE XI

That *ABBA HOME HEALTH CARE CORP.* is desiring to organize under the laws of the State of Florida with its principal office as indicated in the Articles of Incorporation at *3121*

*PONCE DE LEON BLVD, CORAL GABLES* and has named  
*FLORIDA, 33134*

*JOSEPH A. FERRARA, ATTORNEY* its Registered Agent to accept service of process within this state at *3121 PONCE DE LEON BLVD  
CORAL GABLES, FLA 33134*

Having been named to accept service of process for the above stated corporation at the place designated in this certificate I hereby accept to act in this capacity and agree to comply with the provisions of said Act relative to keeping open this office.

Joseph A. Ferrara  
Registered Agent  
Benito A. Fernandez President  
Incorporator  
Signed without prejudice pursuant to § 607

STATE OF FLORIDA     )  
                              ) SS ABBA HOME HEALTH CARE CORP.  
COUNTY OF DADE     )

BEFORE ME, the undersigned authority, personally appeared  
BENITO A. FERNANDEZ to me known to be the  
person who executed the foregoing Articles of Incorporation and  
acknowledge before me that HE subscribed to these Articles  
of Incorporation for the purpose therein expressed.

\_\_\_\_\_ ha produced \_\_\_\_\_,  
as identification or is/are personally known to me and did (did not)  
take an oath.

WITNESS my hand and official seal at CORAL GABLES,  
Florida, this 23<sup>rd</sup> day of February, 1996.

My Commission Expires:

Joseph A. Ferrara  
NOTARY PUBLIC, State of Florida  
JOSEPH A FERRARA  
Print Name  
Commission No.: \_\_\_\_\_

