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((H96000004893))
 DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
 NAME: WORLD ELDERLY CARE, INC.
 FAX AUDIT NUMBER: H96000004893
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ARTICLES OF INCORPORATION
OF
WORLD ELDERLY CARE, INC.

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 I
NAME

The name of the corporation shall be:

WORLD ELDERLY CARE, INC.

ARTICLE II
PRINCIPLE OFFICE

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

5545 N.W. 76 Street
Miami, Florida 33055

ARTICLE III
CAPITAL STOCK

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

100 Shares Common Stock/\$10.00 per value

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ARTICLE IV
INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

PEDRO J. FARIÑAS
5545 N.W. 76 STREET
MIAMI, FLORIDA 33055

ARTICLE V
INCORPORATORS

The names and street addresses of the incorporators to these Articles of Incorporation are:

PEDRO J. FARIÑAS
5545 N.W. 76 STREET
MIAMI, FLORIDA 33055

The undersigned has executed these Articles of Incorporation this 4 day of April, 1996.



PEDRO J. FARIÑAS, PRESIDENT

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CERTIFICATION OF DESIGNATION 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:

WORLD ELDERLY CARE, INC.

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

**PEDRO J. FARIAS
5545 N.W. 76 STREET
MIAMI, FLORIDA 33055**

Pedro Farias
PEDRO J. FARIAS, PRESIDENT

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TALLAHASSEE, FLORIDA

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DATE

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.

4-4-96
Date

Pedro Farias
PEDRO J. FARIAS

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