

196000041015

R. Slowley
3624 SW 10th way
Miami

FLORIDA MPC 330 AIR

20000118011842

-04/30/96--01110--001

****130.25 ****130.25

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (If known):

1. _____ (Corporation Name) _____ (Document #) 20000118011842
05/16/96--01126--012
*****1.00 *****1.00

2. _____ (Corporation Name) _____ (Document #)

3. _____ (Corporation Name) _____ (Document #)

4. _____ (Corporation Name) _____ (Document #)

☐ Walk in

☐ Pick up time _____

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

502
619

5/3/96
TD

Designation	\$35.
Certified Copy	\$52.50
Total Fee Due	\$122.50

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) 487-6878.

Torri Buckloy
Corporate Specialist

Letter Number: 296A00021547



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

May 3, 1998

R. SLOWLEY
3624 SW 68TH WAY
MIRAMAR, FL 33023

SUBJECT: HOME CARE SPECIALIST INC.
Ref. Number: W96000009438

We have received your document for HOME CARE SPECIALIST INC. and check(s) totaling \$130.25. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$1.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

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

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

The corporate fees are as follows:

CORPORATIONS FILING FEES

Profit and NonProfit
Florida & Foreign Corp.

Filing Fees \$35.
Registered Agent

ARTICLES OF INCORPORATION
of

HOME HEALTH SUPPORT SERVICES INC

The undersigned subscriber(s) to these Articles of Incorporation, Natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is: HOME HEALTH SUPPORT SERVICES INC

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation has one class of stock. Common. The common stock holder is entitled to one vote per share of common stock. There shall be no cumulative voting.

The corporation is authorized to issue ONE HUNDRED shares (100) of ONE Dollar(s) (\$ 1.00) par value Common Stock.

ARTICLE IV-A - CAPITAL STOCK

Any shareholder wishing to sell his/her stock must offer the stock to the current shareholders at a reasonable fair market rate and the offer must be refused prior to offering the stock to any outside party.

ARTICLE VII - INCORPORATORS

The name and address of the incorporator of these Articles of Incorporation is DIONNE MORRIS, 4119 N ST RD 7 #7427 FT LAUDERDALE FL. 33319.

ARTICLE VIII - BYLAWS

The power to adopt, alter, amend or repeal bylaws shall be vested in the Board of Directors and the shareholders.

ARTICLE IX - INDEMNIFICATION

The corporation shall indemnify to the full extent permitted by law, the incorporator, any officer, director, employee, or agent of the corporation, or any former officer, director, employee, or agent of the corporation, or any person who at the request of the corporation is or was serving as a director, officer, employee, or agent of another corporation, partnership, joint venture, trust or other enterprise.

ARTICLE X - FILING STATUS

The corporation shall file as regular C Corporation for federal tax purposes. This status may be changed if a majority vote is gained by the board of directors.

ARTICLE XI - AMENDMENT

This corporation reserves the right to amend or repeal any prior provisions contained in these Articles of Incorporation or any amendments thereto.

HOME HEALTH SUPPORT SERVICES INC

Subscriber	No of Shares	Consideration
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ROSEMARIE A SLOWLEY	100	(C)
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ONE HUNDRED SHARES ISSUED AND OUTSTANDING

(C) Common Share
(P) Preferred Share

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The Principal office, if known, or mailing address of the corporation is:

Name: HOME HEALTH SUPPORT SERVICES INC
Address: 3624 N.W. 68th way
City: Miramar FLORIDA Zip: 33023

The name and street address of the Initial Registered Agent of this Corporation is:

Name: ROSEMARIE A SLOWLEY
Address: 3624 SW 68 WAY
City: MIRAMAR FLORIDA Zip: 33023

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) directors initially. The number of directors may be either increased or diminished from time to time by the BY-Laws, but shall never be less than one (1). The names and address of the initial director(s) of the corporation are as follows:

Name:
Address:
City: Florida Zip:

Name: ROSSMARIE A SLOWLEY - PRESIDENT
Address: 3624 SW 68 WAY
City: MIRAMAR Florida Zip: 33023

Name:
Address:
City: Florida Zip:

Name:
Address:
City: Florida Zip:

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 17th day of April 1996.

Rosemarie A. Slowley

STATE OF FLORIDA

COUNTY OF Broward

)
SS

before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared

Rosemarie A. Slowley - (FL Drivers license)

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, and who acknowledged before that Rosemarie A. Slowley executed these Articles of Incorporation.

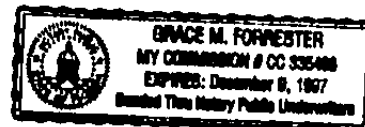
IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 17th day of April 1996.

(notary seal)

Grace M. Forrester
(Notary Public, State of Florida at
Large)

My commission Expires:

12/9/97



CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

HOME HEALTH SUPPORT SERVICES INC

Pursuant to Florida Law Statutes Sect ons 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 3624 SW 68 WAY 3624 SW 68 Way

MIRAMAR, FL. 33023 Miramar, FL. 33023

has named ROSEMARY A SLOWLEY Rosemarie Slowley

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

Rosemarie Slowley
(registered agent)