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LAZARUS CORI	PORATE INDUSTRIES, INC. equestor's Name	
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890 S.W. 87	AVENUE SUITE: 16 Address	1
MIAMI, FLORI	ΓDA 33174 (305)552-5973	1
City/State/Zip Phone //		071 11 0 1
LOCAL REPRESENTATIVE TALLAMASSEE		Office Use Only
CORPORATION	NAME(S) & DOCUMENT NU	MBER(S), (if known):
1. <u>MANY</u>	NURSING 5E/	PUICES INC.
2. <u>(Com</u>	poration Namo) (E	ocument #)
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Walk in	Pick up time 2/06	Certified Copy
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ENEW FILINGS	AMENDMENTS	i ji
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Profit	Amendment	AMII: 02 CORPORATI
NonProfit	Resignation of R.A., Officer/ Dire	
Limited Liability Domestication	Change of Registered Agent	
Other	Dissolution/Withdrawal	
<u> </u>	Merger	
OTHER FILINGS	REGISTRATION OUT OF COMMENTS O	ASSI
Annual Report .	QUALIFICATION	
Fictitious Name	Foreign	PH IZ:
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P2F031/1/05\		Examiner's Initials

CR2E031(1/95)

ARTICLES OF INCORPORATION

FILED

OF

96 JUN -3 PM 12: 16

MANNY NURSING SERVICES, INC.

TALLAHASSEE. FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be: MANNY NURSING SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

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

6807 S.W. 105 COURT MIAMI, FL 33173

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500 shares all of which shall be common shares with a par value of One (\$1.00) Dollar.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

MANUEL J. ALVAREZ

6807 S.W. 105 COURT

MIAMI, FL 33173

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ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

100%
MANUEL J. ALVAREZ (D/P/Vr/T/S)
6807 S.W. 105 COURT
MIAMI, FL 33173

<u>CERTIFICATE OF DESIGNATION</u> <u>REGISTERED AGENT / REGISTERED OFFICE</u>

Pursuant to the provisions of Section 607.325, 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: MANNY NURSING SERVICES, INC.
- 2. The name and address of the registered agent and office is:

MANUEL J. ALVAREZ, 6807 S.W. 105 COURT (P.O. BOX NOT ACCEPTABLE)	96 JUII TÄLLAI
MIAMI, FL 33173 . (CITY / STATE / ZIP)	N-3 PK
SIGNATURE X Manual (CORPORATE OFFICER)	12: 16 FLORIDA
TITLE: D/P/V/S/T	iin-

DATE : 5/31/96

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THE CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE X Manus 15 / 31/96.