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HAYS, FL 33426
800-342-0866
001-238-0070
001-238-0091 FAX

P96000074664



PROFESSIONAL LEGAL & FINANCIAL SERVICES ACCOUNT NO. : 072100000032

REFERENCE : 078267 11301A

AUTHORIZATION :

COST LIMIT : \$ PREPAID

ORDER DATE : September 9, 1996

ORDER TIME : 9:16 AM

ORDER NO. : 078267

CUSTOMER NO: 11301A

CUSTOMER: Mr. Michael E. Greene
NEIMARK GREENE & NADEL
Suite 602
800 Corporate Drive
Ft. Lauderdale, FL 33334

7000001942257
09/09/96--01035--007
***122.50 ***122.50

DOMESTIC FILING

NAME: PERSONI CARE HEALTH SERVICES
OF SOUTH FLORIDA, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Clint Fuhrman

EXAMINER'S INITIALS:

FILED
SECTION OF REGISTRATIONS
95 SEP -9 PM 3:42

SECTION OF CERTIFICATES
95 SEP -9 PM 3:42
9/9/96

ARTICLES OF INCORPORATION
OF

FILED
IN THE STATE
OF FLORIDA
96 SEP -9 PM 3:42

PERSONI CARE HEALTH SERVICES OF SOUTH FLORIDA, INC.

I, the undersigned, a natural person competent to contract, do hereby make, subscribe and file these Articles of Incorporation for the purpose of organizing a corporation under the laws of the State of Florida.

ARTICLE I
NAME OF CORPORATION

The name of this Corporation shall be:

PERSONI CARE HEALTH SERVICES OF SOUTH FLORIDA, INC.

ARTICLE II
GENERAL NATURE OF BUSINESS

The general nature of the business to be transacted by this Corporation shall be to engage in any and all lawful business permitted under the laws of the United States and the State of Florida.

ARTICLE III
CAPITAL STOCK

The total authorized capital stock of this Corporation is 100 shares of Common Stock, par value \$1.00 per share.

ARTICLE IV
TERM OF EXISTENCE

The Corporation shall exist perpetually.

ARTICLE V
ADDRESS OF PRINCIPAL OFFICE IN THIS STATE

The initial street address of the principal office of this Corporation in the State

of Florida is 10162 N. W. 23rd Street, Coral Springs, FL 33065. The Board of Directors may from time to time move the principal office to another address in Florida.

ARTICLE VI
NUMBER OF DIRECTORS

This Corporation shall have not less than one (1) Director.

ARTICLE VII
INCORPORATOR

The name and street address of the Incorporator of these articles is:

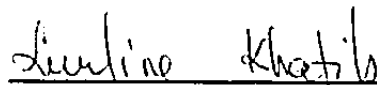
Lurline Khatib
10162 N. W. 23rd Street
Coral Springs, FL 33065

ARTICLE VIII
INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this Corporation is NIEMARK, GREENE & NADEL, 800 Corporate Drive, Suite 602, Fort Lauderdale, FL 33334, and the name of the initial registered agent of the Corporation at that address is MICHAEL E. GREENE, ESQ.

ARTICLE IX
COMMENCEMENT OF CORPORATE EXISTENCE

Pursuant to Section 607.0203, Florida Statutes, this Corporation shall commence its corporate existence upon filing.



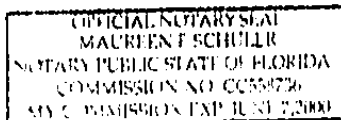
LURLINE KHATIB, INCORPORATOR

STATE OF FLORIDA
COUNTY OF BROWARD

I HEREBY CERTIFY that on this 6th day of September, 1996, before me, a Notary Public duly authorized in the State and County named above to take acknowledgments, personally appeared LURLINE KHATIB, to me known to be the person described as incorporator in and who executed the foregoing Articles of Incorporation and who swore and acknowledged that he/she executed the foregoing Articles of Incorporation for the purposes therein set forth.

WITNESS my hand
and official seal.

Maureen E. Schuller
Notary Public



Print, stamp or type as
commissioned

- ☐ Personally known to me, or
☒ Produced Identification:

Id. driver license
(type of identification)

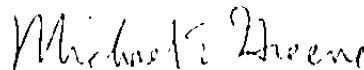
**CERTIFICATE DESIGNATING PLACE OF BUSINESS
OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN
THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED**

Pursuant to Section 48.091 and 607.0501, Florida Statutes, the following is submitted:

That **PERSONI CARE HEALTH SERVICES OF SOUTH FLORIDA, INC.**, desiring to organize under the laws of the State of Florida, with its Registered Office as indicated in the Articles of Incorporation at NIEMARK, GREENE & NADEL, 800 Corporate Drive, Suite 602, Fort Lauderdale, FL 33334, and **MICHAEL E. GREENE**, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGMENT

Having been named to accept service of process for the above-stated corporation at the place designated in this 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.



MICHAEL E. GREENE, REGISTERED AGENT

FILED
CORPORATION
91 SEP 12