

P96000081523

TRANSMITTAL LETTER

96 OCT -2 PM 1:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: Orlando Home Care, Inc.
(proposed corporate name)

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of \$ 125.00.

900001935749
-08/29/96--01054--020
****122.50 ****122.50

FROM:

Barbara Konits
Name
425 W. Colonial Drive - Suite 205B
Address
Orlando, FL 32804
City, State, & Zip
(407) 293-6007
Telephone Number
407) 872-1020

wglo
PH
9/5/96
BH
10/2/96

Note: Additional copy of articles is needed only when certified copy is requested.



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

September 26, 1996

PAT FITZPATRICK
425 W COLONIAL DRIVE - SUITE 204
ORLANDO, FL 32804

SUBJECT: ORLANDO HOME CARE, INC.
Ref. Number: W96000018519

We have received your document for ORLANDO HOME CARE, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not serve as its own registered agent. Please designate an individual, another active domestic corporation, or a foreign corporation authorized to transact business within this state, having a Florida street address identical with that of the registered office.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

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) 487-6915.

Pamela Hall
Document Specialist

Letter Number: 296A00041508

MASSAPEQUA TEMPORARIES, INC.
425 West Colonial Drive
Suite 206
Orlando, FL 32804
(407) 872-7777

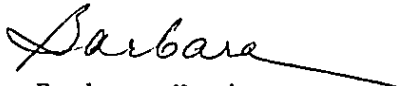
October 1, 1996

Pamela Hall
Document Specialist
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Pam,

Pursuant to your letter #296A00041508, I have enclosed the corrected incorporation papers. As we discussed, will you kindly call me after filing, or if there are any problems? Thank you for all your assistance.

Very truly yours,


Barbara Konits
Vice President

ARTICLES OF INCORPORATION

OF

Orlando Home Care, Inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Orlando Home Care, Inc.

ARTICLE II - PRINCIPAL OFFICE

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

425 West Colonial Drive
Suite 204A
Orlando, FL 32804

ARTICLE III - CAPITAL STOCK

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

ONE THOUSAND (1,000) SHARES AT TEN CENTS (\$.10) EACH

ARTICLE IV - INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Barbara Konits
C/O Massapequa Temporaries, Inc.
425 W. Colonial Dr., Ste. 206
Orlando, FL 32804

ARTICLE V - INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation:

Barbara Konits
C/O Massapequa Temporaries, Inc.
425 W. Colonial Dr., Ste. 206
Orlando, FL 32804

The undersigned has(have) executed these Articles of Incorporation this 15 day of October, 1996.

Barbara Konits
Barbara Konits

ARTICLE VI - PURPOSES

Business Purpose: To provide home health care services.

CERTIFICATE 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:

Orlando Home Care, Inc.

The registered agent and office is:

Barbara Konits
C/O Massapequa Temporaries, Inc.
425 W. Colonial Dr., Ste 206
Orlando, FL 32804

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Barbara Konits
Barbara Konits

Oct. 1, 1996
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 AC. 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 POSITIONS AS REGISTERED AGENT.

Barbara Konits
Barbara Konits

Oct. 1, 1996
DATE