

P97000076910

~~PO BOX 2244
Miami, Florida 33135~~

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-08/01/97--010/00--0009
***122.50 ***122.50

City/State/Zip

Office Use Only

CORPORATION NAME

(NUMBER(S), (if known):

(305)649-9041

VIRGY HOME HEALTH CARE, INC.
215 SW 17TH AVE., STE. 308

1. _____
(Corporation Name) (Document #)
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

EFFECTIVE DATE

09/02/97

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

FILED
97 SEP -5 AM 11:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Nadeau SEP 5 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

August 5, 1997

CLASSIC GROUP CORP.
P.O. BOX 352484
MIAMI, FL 33135

SUBJECT: VIRGY HOME HEALTH CARE, INC.
Ref. Number: W97000017950

We have received your document for VIRGY HOME HEALTH 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):

The effective date is not acceptable since it is not within five working days of the date of receipt.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Please return the original and one copy of 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 (850) 487-6878.

John Nedeau
Document Specialist

Letter Number: 097A00039647

ARTICLES OF INCORPORATION

We, the undersigned, as proper persons acting as incorporators of a corporation under the laws of the State of FLORIDA, adopt the following articles of incorporation:

FIRST

The name of the corporation is:

VIRGY HOME HEALTH CARE, INC

SECOND

The period of its duration is:

Perpetual

THIRD

The purpose of the corporation is:

Home Health Care Service

FOURTH

The aggregate number of authorized shares is:

1000

FIFTH

The corporation will not commence business until at least September 2nd, 1997 \$100.00 dollars have been received by it as consideration for the issuance of shares.

SIXTH

Cumulative voting of shares of stock are authorized.

SEVENTH

FILED
97 SEP -5 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EFFECTIVE DATE

09/02/97

Provisions limiting or denying to shareholders the preemptive right to acquire additional or treasury shares of the corporation are:

N/A

EIGHTH

Provisions for regulating the internal affairs of the corporation are:

N/A

NINTH

The address of the initial registered office of the corporation is:

215 S.W 17th Ave.
Suite 308
Miami, Florida 33135

and the name of its initial registered agent at such address is:

Remberto J. Rivero

TENTH

Address of the principal place of business is:

215 S.W 17th Ave.
Suite 308
Miami, Florida 33135

ELEVENTH

The number of directors constituting the initial board of directors of the corporation is 1, and the names and address of the persons who are to serve as directors until the first annual meeting of shareholders or until their successors are elected and shall qualify are:

Name	Address
<u>Remberto J. Rivero</u> President / Owner	<u>12675 NW 9th Way Miami, Florida 33182</u>

TWELFTH

The name and address of each incorporator is:

Name	Address
<u>Remberto J. Rivero</u> President / Owner	<u>12675 NW 9th Way Miami, Florida 33182</u>

The Undersigned Incorporators have executed these Articles of Incorporation this
September 2, 1997



Signature

CERTIFICATE OF DESIGNATION
REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provision of sections 607.0501 or 617.0501, Florida , Statues, the undersigned corporation, organized under the laws of the State of Florida, submits the following statements in designating the registered office / registered agent , in the State of Florida.

1. The name of the corporation is: **VIRGY HOME HEALTH CARE, INC.**
2. The name and address of the registered agent and office is:

REMBERTO J. RIVERO

215 S.W. 17th Ave
Suite # 308
Miami, Florida 33135

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 STATUES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

SIGNATURE



DATE

9-2-97

FILED
97 SEP -5 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EFFECTIVE DATE

09/02/97