

PRO00024932

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LAZARUS CORPORATE FILING SERVICE, INC.
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LOCAL REPRESENTATIVE TALLAHASSEE

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 98 MAR 17 PM 2:11
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

- TIFFANY HEALTH CARE, INC.
 (Corporation Name) (Document #)
- 300002459643-6
 (Corporation Name) (Document #)
- 03/17/98-01067-015
 (Corporation Name) (Document #) *****78.75 *****78.75
- (Corporation Name) (Document #)

- Walk in Pick up time 2:00 Certified Copy
 Mail out Will wait Photocopy Certificate of Status

NEW FILINGS	
<input checked="" 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

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 98 MAR 17 AM 11:58
 DIVISION OF CORPORATION

K. Rolfe MAR 17 1998

Examiner's Initials

ARTICLES OF INCORPORATION

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

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TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

TIFFANY HEALTH CARE, INC

ARTICLES II PRINCIPAL OFFICE

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

**18615 TIFFANY DRIVE
MIAMI, FLORIDA 33157**

ARTICLES III SHARES

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

500 SHARES \$ 1.00 PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**VICTOR J. GONZALEZ
18615 TIFFANY DRIVE
MIAMI, FLORIDA 33157**

ARTICLES V INCORPORATE(S)

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

VICTOR J. GONZALEZ

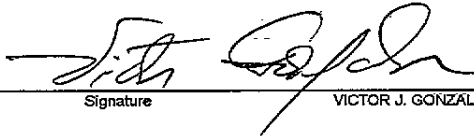
PRESIDENT, SECRETARY, TREASURER,
DIRECTOR

ARTICLE VI DIRECTOR(S)

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

VICTOR J. GONZALEZ
18615 TIFFANY DRIVE
MIAMI, FL. 33157

The undersigned incorporate(s) has(have) executed these Articles of Incorporation this 14^H day of MARCH, 1998



Signature

VICTOR J. GONZALEZ

PRESIDENT, SECRETARY, TREASURER
DIRECTOR

Signature

Articles of Incorporation

Filing Fee - \$35.00

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISION OF SECTION 607 .051, FLORIDA STATUES, THE UNDERSIGNED CORPORATION, ORGANISED 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:

TIFFANY HEALTH CARE, INC

2. The name and address of the registered agent and office is:


VICTOR J. GONZALEZ
(Name)

18615 TIFFANY DRIVE
(PO Box not acceptable)

MIAMI, FLORIDA 33157
(City/State/Zip)

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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 statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



VICTOR J. GONZALEZ (Signature)

03/14/98
(Date)

DIVISION OF CORPORATIONS, PO BOX 6327, TALLAHASSEE, FL 32314