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(((H98000017129)))

TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: MIT PRODUCTS AND SERVICE, INC.

ACCT#: 070402002741

CONTACT: RAFAEL MOREL

PHONE: (305)871-0008

FAX #: (305)871-0550

NAME: QUALITY HOME CARE SERVICES, INC.

AUDIT NUMBER.....H98000017125

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..1 PAGES..... 4

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TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION

OF  
QUALITY HOME CARE SERVICES, INC.

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:

QUALITY HOME CARE SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

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

8714 N.W. 36 STREET  
SUNRISE, FLORIDA 33351

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any time is: 1000 SHARES, ONE DOLLAR PAR VALUE PER SHARE.

ARTICLE IV-PREEMPTIVE RIGHTS

Every stockholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which it already holds, shall have the right to purchase his pro rata share thereof, as nearly as may be done without issuance of fractional shares as the price at which it is offered to others.

H98000017125

PREPARED BY: MIT PRODUCTS & SERVICE, INC.  
6555 N. W. 36 ST. STE. 301  
MIAMI, FL. 33166  
PHONE (305) 871-0008

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ARTICLE V-INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

PRISCILLA ANN JOSEPH  
8714 N.W. 36 STREET  
SUNRISE, FLORIDA 33351

ARTICLE VI

INITIAL BOARD OF DIRECTOR(S)

This corporation shall have (1) (one) director initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one. The name(s) and address(es) of the initial director(s) on this corporation is (are):

PRISCILLA ANN JOSEPH  
8714 N.W. 36 STREET  
SUNRISE, FLORIDA 33351

ARTICLE VII

OFFICER(S) AND SUBSCRIBER(S)

The officer(s) and subscriber(s) of this corporation is as follow:

PRISCILLA ANN JOSEPH	PRESIDENT/SECRETARY	600 SHARES
	TREASURER/DIRECTOR/	
	VICE-PRESIDENT	

ARTICLE VIII

INCORPORATOR(S)

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

PRISCILLA ANN JOSEPH  
8714 N.W. 36 STREET  
SUNRISE, FLORIDA 33351

The undersigned has (have) executed these Articles of  
Incorporation this 14TH Day of SEPTEMBER, 1998



PRISCILLA ANN JOSEPH/INCORPORATOR  
Signature/ Title

**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: QUALITY HOME CARE SERVICES, INC.

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

FRISCILLA ANN JOSEPH  
 (NAME)

8714 N.W. 36 STREET  
 (ADDRESS)

SUNRISE, FLORIDA 33351  
 (CITY/STATE/ZIP)

SIGNATURE *Joseph*

TITLE \_\_\_\_\_

DATE September 14, 1998

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.

SIGNATURE *Joseph*

DATE September 14, 1998

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