# OFFICE ONLY (Trume #) DEPONENT PROPERTY (Trume #) DEPONENT

PETCHOSE ONLY (Pocume #		
7 000		
LAZARUS CORPORATE FILING SERVI	CE, INC.	
(Requestor's Name)		
3320 S.W. 87th AVENUE		
(Address) MIAMI, FLORIDA (305)552-597	73	
(City, State, Zip) (Phone #)	· · · · · · · · · · · · · · · · · · ·	
LOCAL REPRESENTATIVE TALLAHASS	SEE OFFICE USE ONLY	
	OFFICE GGE OND!	
CORPORATION NAME(S) & DO	CHMENT NUMBER(S) (if brown):	
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1. AMERICARE	MEDICAL INC. 58 8	
(Corporation Name)	(1)	
2.	(Document #)	
(Corporation Name)	(Document #)	
(Corporation Name)	(Document #)	
4.	AAA 59	
(Corporation Name)	(Document #)	
Walk in Pick up time	2.00 V Certified Copy	
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Mail out Will wait	Photocopy Certificate of Status	
	•	
	SERVICE AND CO. 1	
NEW FILINGS	AMENOMENTS	
Profit	Amendment	
NonProfit	Resignation of R.A., Officer/Director	
, Limited Liability	Change of Registered Agent	
Domestication	Dissolution/Withdrawal	
Other	Merger	
	-	-
OTHER FILINGS	REGISTRÁTION/	
35		ļ
Annual Report	QUALIFICATION         100026624.113           Foreign         -10/13/9801023019           *****78.75         ******78.75	
Fictitious Name	Limited Partnership	
Name Reservation —	Reinstatement	
- 25 :01 MV ET 130 86	Trademark 177/12	-
- EBCEINED		
	Other Examiner's Initials	

CR2E031(9/92)

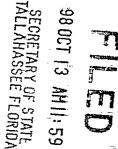
#### ARTICLES OF INCORPORATION

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:

Americare Medical Inc.



#### ARTICLE II PRINCIPAL OFFICE

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

4121 N.W 5th St Ste # 214 Plantation, Fl 33317

#### ARTICLE III SHARES

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

100 Shares of \$1.00 Per value

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

4121 N.W 5th St Ste # 214 Plantation, Fl 33317 The Name of the initial registered Agent is Marcos Garcia

#### ARTICLE V INCORPORATOR(S)

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

Marcos GARCIA
4121 N.W 5th St # 214
Plantation, FI 33317

#### ARTICLE VI DIRECTOR(S)

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

Marcos Garcia (P) 4121 N.W 5th St # 214 Plantation, Fl 33317

rator(s) has(have) executed these Article, 19, 19	
Signature	<del></del> -
Signature	_
Signature	

Articles of Incorporation Filing Fee - \$35

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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.

The name and address of the registered agent and office is:		
	Marcos Garcia (NAME)	
<b>~</b> —-	4121 N.W. 5th St # 214 Plantation, Fl 33317 (P.O. BOX NOT ACCEPTABLE)	

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 98 OCT 3 AH 11: 59

DATE 10 - 12 - 90 ALLAHASSEE FLORIDA

REGISTERED AGENT FILING FEE: \$35.00