Division of Corporations

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Florida Department of State

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From: Account Name Account Number Phone Fax Number	: EMPIRE CORPORATE KIT COMPANY : 072450003255 : (305)541-3694 : (305)541-3770	FILED JAN -7 AN 8: CRETARY OF STAT

FLORIDA PROFIT CORPORATION OR P.A.

WINCHAR HEALTH SERVICES, INC.

Certificate of Status	0
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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 6, 1999

EMPIRE

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SUBJECT: WINCHAIR HEALTH SERVICES, INC. REF: W99000000280

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Neysa Culligan Document Specialist

FAX Aud. #: H99000000322 Letter Number: 699A00000518

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

EMPIRE CORPORATE KIT

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ARTICLES OF INCORPORATION

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Winchar Health Services, Inc.



ARTICLE II PRINCIPAL OFFICE

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

1311 SW 102 Avenue Pembroke Pines, FL 33025

ARTICLE III SHARES

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

200 shares of common stock

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Nelson Akinrinade, Esq. 8400 N. University Drive Suite 311, Tamarac, Florida 33321

Prepared by Nelson Akinrinade Florida Bar #136875 8400 N. University Dr. # 311 Jamarac, FL 33321 (954) 720.7678 4990000032

EMPIRE CORPORATE KIT

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ARTICLE V INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

Winston Thompson 1311 SW 102 Avenue Pembroke Pines, FL 33025

The undersigned incorporator has executed these Articles of Incorporation this <u>5th</u> day of <u>January</u> 19<u>99</u>.

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H9900000322 CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDESIGNED 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:

Winchar Health Services, Inc.

2. The name and address of the registered agent and Affice is: <u>Nelson Akinrinade, Esq.</u> Name <u>8400 N. University Drive, Suite 341</u> <u>Address</u>

> Tamarac, FL 33321 City, State & Zip

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 provision 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.

1-5-99

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