

P 99000042737

VIDAL L. LOPEZ  
9951 S.W. 20TH STREET  
MIAMI, FLORIDA 33165

April 28, 1999

Department of State  
Division of Corporation  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: **United Home Health Providers, Inc.**

To whom it may concern:

Enclosed please find original and one copy of the Articles of Incorporation of United Home Health Providers for filing. Also, enclosed is my check in the amount of \$78.75 as filing fee and certified copy.

Please file the said Article of Incorporation and return a stamped copy in the envelope provided.

Thank you for your courtesy in this regard.

Sincerely,

Vidal L. Lopez

VLL/wc  
Enclosure

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\*\*\*\*\*78.75 \*\*\*\*\*78.75

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99 MAY 11 PM 1:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(Rec.  
5/11)

5/11/99  
JML



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

May 5, 1999

VIDAL L. LOPEZ  
9951 SW 20TH ST.  
MIAMI, FL 33165

SUBJECT: UNITED HOME HEALTH PROVIDERS  
Ref. Number: W99000010493

We have received your document for UNITED HOME HEALTH PROVIDERS and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

- ① The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.
- ② The registered agent and street address must be consistent wherever it appears in your document.
- ③ You must list the corporation's principal office and/or a mailing address in the document.

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) 487-6928.

Michelle Milligan  
Document Specialist

Letter Number: 799A00024374

## ARTICLE OF INCORPORATION

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

**ARTICLE I:** The name of this corporation is:

United Home Health Providers, Inc.

**ARTICLE II:** The principal office and mailing address of the corporation shall be: 4300 West Flagler Street, Miami, Florida 33145.

**ARTICLE III:** The corporation is organized for the purpose of transacting any and all lawful business for which corporations may be formed under Chapter 607 of the Florida Statutes.

**ARTICLE IV:** The corporation is authorized to issue 7,500 shares of common stock, par value \$1.00 per share.

**ARTICLE V:** The name of the initial registered agent, and the street address of the initial registered office, of the corporation are: Vidal L. Lopez, 9951 S.W. 20th Street, Miami, Florida 33165.

**ARTICLE VI:** The number of directors may be increased or decreased from time to time as provided in the by-laws of the corporation. The name and address of the initial director of the corporation is: Vidal L. Lopez, 9951 S.W. 20th Street, Miami, Florida 33165.

**ARTICLE VII:** The name and address of the Incorporator of the corporation is: Vidal L. Lopez, 9951 S.W. 20th Street, Miami, Florida 33165.

**ARTICLE VIII:** The corporation shall indemnify its officers, directors, employees and agents to the fullest extent permitted by law.

**ARTICLE IX:** The corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or in any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

**IN WITNESS** the undersigned incorporator has executed these Article of Incorporation in the State of Florida.

By: 

**INCORPORATOR**  
**VIDAL L. LOPEZ**

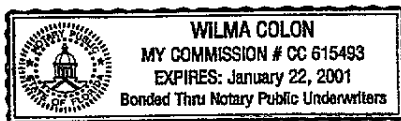
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**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

SS:

**I HEREBY CERTIFY** that on this day before me, an officer duly authorized in the State aforesaid to take acknowledgments, personally appeared VIDAL L. LOPEZ, to me known to be the person described I and who executed the foregoing instrument and acknowledged before me that she executed the same.

7 th **WITNESS** my hand and official seal in the County and State last aforesaid on this day of May, 1999.

Wilma Cole  
Notary Public, State of Florida

**ACKNOWLEDGMENT BY REGISTERED AGENT**

Having been named to accept service of process for the above stated Corporation, at the place designated in the foregoing Articles of Incorporation, I hereby accept to act in this capacity, and agree to comply with the applicable provisions of all pertinent legislation.

By: VIDAL L. LOPEZ  
REGISTERED AGENT  
VIDAL L. LOPEZ

FILED  
99 MAY 11 PM 1:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA