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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations
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From:

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**FLORIDA PROFIT/NON PROFIT CORPORATION
SUNSHINE STATE HOME HEALTH AGENCY CORP**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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MS

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:Sunshine state Home Health Agency corp**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

1500 NW 89 ct Suite 118
Doral FL 33172**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Jorge Felix Fraga Sierra - P
Denny Andres Reyes - Sec**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**


The name and Florida street address (PO Box not acceptable) of the registered agent is:

Denny Andres Reyes
1500 NW 89 ct Suite 118
Doral FL 33172**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Denny Andres Reyes
1500 NW 89 ct Suite 118
Doral FL 33172

EIN. 33-3188074

Required Signatures:

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

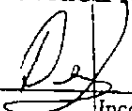


Registered Agent

2/3/25

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Incorporator

2/3/25

Date

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