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ARTICLES OF INCORPORATION

STATE OF IDAHO

OF

DD NURSING SERVICES, INC.

The undersigned, acting as incorporators of a corporation under the Idaho Business Corporation Act, adopt the following Articles of Incorporation for such corporation:

1. NAME: The name of the corporation is DD NURSING SERVICES, INC.
2. DURATION: The period of its duration is perpetual.
3. PROFIT: This is a profit corporation.
4. PURPOSES: The purpose or purposes for which the corporation is organized is to perform nursing services and any other lawful business for which corporations may be incorporated under the Idaho Business Corporation Act.
5. SHARES AUTHORIZED: The aggregate number of shares which the corporation shall have authority to issue is ONE THOUSAND (1000) shares of no par value common stock.
6. PRE-EMPTIVE RIGHTS: Shareholders shall have pre-emptive rights to acquire unissued or treasury stock or securities convertible into or carrying a right to subscribe to or acquire shares.
7. BUSINESS AFFAIRS: Provisions for the regulation of the internal affairs of the corporation are such as may be provided by the corporation's By-laws, including restrictions on the transfer of shares.
8. REGISTERED AGENT AND OFFICE: The initial registered agent is:

Karen R Leavitt

The initial registered office is:

845 Winona Drive
Idaho Falls, Idaho 83401

IDaho SECRETARY OF STATE

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9. **BOARD OF DIRECTORS:** There shall be no Board of Directors. Pursuant to Idaho Code S30-1-35 the powers and duties conferred or imposed upon the Board of Directors by the Idaho Business Corporation Act shall be exercised or performed by the President of the corporation as provided by the corporation's by-laws.

10. **INCORPORATORS:** The name and address of each incorporator is:

Karen R Leavitt, 845 Winona Drive, Idaho Falls, Idaho 83401

DATED this 24 day of July 2000.



Karen R Leavitt

STATE OF IDAHO)
:ss
County of Bannock)

On this 24th day of July, 2000, before me, the undersigned, Notary Public in and for said State, personally appeared Karen R Leavitt known to me to be the person whose name is subscribed to the foregoing and acknowledged to me that they executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and seal the day and year first above written.

(SEAL)



NOTARY PUBLIC FOR IDAHO
Residing at: POCATELLO, IDAHO
My Commission expires: 5/22/2004