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TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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-09/26/01--01060--005
*****87.50 *****87.50

SUBJECT: Community Choice Connection Corporation
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Marta Elaine Giambrone
Name (Printed or typed)

2825 SE Wiltshire Terr.
Address

Port St. Lucie, FL 34952
City, State & Zip

(561) 335-8715
Daytime Telephone number

FILED
01 SEP 26 PM 1:23
SECRETARY OF STATE
TALLAHASSEE, FL 32304

NOTE: Please provide the original and one copy of the articles.

9-27-01
10-28-01
MC

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Community Choice Connection Corporation

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

P.O. Box 8235, Port St. Lucie, FL 34985

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Support coordination services for special needs people

ARTICLE IV SHARES

The number of shares of stock is:

100 shares shall be issued and held in house

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Marta Elaina Giambrone, CEO, 2825 SE Wiltshire Terr., Port St. Lucie, FL 34952

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Marta Elaina Giambrone, 2825 SE Wiltshire Terr., Port St. Lucie, FL 34952

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Marta Elaina Giambrone, 2825 SE Wiltshire Terr., Port St. Lucie, FL 34952

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

Marta Elaina Giambrone
Signature/Registered Agent

09-12-01
Date

Marta Elaina Giambrone
Signature/Incorporator

09-12-01
Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA