

P95000064505

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
 TOLL FREE No. 1-800-342-8062
 FAX (904) 222-1222

NAME _____
 FIRM _____
 ADDRESS _____

 PHONE () _____

Service Top Priority _____ Regular _____
 One Day Service Two Day Service

To us via _____ Return via _____

Matter No. _____ Express Mail No _____

State Fee \$ _____ Our \$ _____

RE. Individual chore,
Inc.

C.C. FEE. DISBURSED

- Capital Express™
- Art of Inc File
- Corp Record Search
- Ltd Partnership File
- Foreign Corp File
- () Cert Copy(s)
- Art of Amend File
- Dissolution/Withdrawal
- C U S-
- Fictitious Name File
- Name Reservation
- Annual Report/Reinstatement
- Reg Agent Service
- Document Filing
- Corporate Kit
- Vehicle Search
- Driving Record
- Document Retrieval
- UCC 1 or 3 File
- UCC 11 Search
- UCC 11 Retrieval
- File No's Copies
- Courier Service
- Shipping/Handling
- Phone ()
- Top Priority
- Express Mail Prep
- FAX () pgs

000001555138
 000001555138
 123456789

SUBTOTALS	
FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$

68-3-111 12:01:35
 55-MIG-21 PM-3-39
 STATE OF FLORIDA
 COUNTY OF ALBANY

Handwritten signature/initials

REQUEST TAKEN CONFIRMED APPROVED

DATE _____ TIME _____ BY nlc CK No. _____

WALK-IN Will Pick Up 8/21 3:00

Please remit invoice number with payment
TERMS NET 10 DAYS FROM INVOICE DATE
 1 1/2% per month on Past Due Amounts
 Past 30 Days 18% per Annum

THANK YOU
 from
 Your Capital Connection

TRANSMITTAL LETTER

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

Subject: Individual Care, Inc.

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

- \$ 70.00 - Filing Fee
- \$ 78.75 - Filing Fee & Certificate
- \$122.50 - Filing Fee & Certified Copy
- \$131.25 - Filing Fee, Certified Copy & Certificate

From: Individual Care, Inc.
Name

2700 East Bay Dr., #107
Address

Largo, Florida 34641
City, State & Zip

(813) 539-0895
Daytime telephone number

ARTICLES OF INCORPORATION

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

OF

55 AUG 21 PM 3:39

Individual Care, Inc.

The incorporator, 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:

Individual Care, Inc.

ARTICLE II PRINCIPAL OFFICE

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

2700 East Bay Dr., #107
Largo, Florida 34641

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Frank Weiss
2700 East Bay Dr., #107
Largo, Florida 34641

ARTICLE V INCORPORATOR(S)

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

Frank Weiss
2700 East Bay Dr., #107
Largo, Florida 34641

The undersigned incorporator has executed these Articles of Incorporation this 11th day of August, 1995.



Signature

Signature

Signature

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 AUG 21 PM 3:39

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED 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. Individual Care, Inc.
2. The name and address of the registered agent and office is.

Frank Weiss

(Name)

2700 East Bay Dr., #107

Largo, Florida 34641

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 provisions 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.

Frank Weiss

(Signature)

8/11/95

(Date)