

P05000164406

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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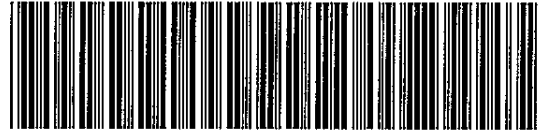
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/16/05--01053--001 **70.00

FILED
05 DEC 16 AM 8:32
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

SMALL BUSINESS ACCOUNTING, P.A.

(407) 290-6382
Fax: (407) 290-6280

MARC A. PAYNE, Accountant

2826 Shader Road
Orlando, Florida 32808-3918

December 13, 2005

Department of State
Division of Corporations/Clifton Bldg.
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed please find two copies of the Articles of Incorporation for:

Adaptive Aging Services, Inc.

and a check in the amount of \$70.00 for payment of Corporate filing fee and designation of registered agent.

Please forward completed Articles of Incorporation with the filing date stamped on it to the Incorporator:

Marc A. Payne
2826 Shader Road
Orlando, FL 32808-3918

If you have any questions please call Marc A. Payne at 407-290-6382.



Marc A. Payne
Incorporator

ARTICLES OF INCORPORATION

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

ARTICLE I THE NAME OF THE CORPORATION

Adaptive Aging Services, Inc.

ARTICLE II THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS

4867 Red Bay Drive
Orlando, FL 32829

ARTICLE III THE PURPOSE FOR WHICH THIS CORPORATION IS ORGANIZED

Any and all Lawful Business

ARTICLE IV THE NUMBER OF SHARES THE CORPORATION IS AUTHORIZED TO ISSUE

100 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Title: President/Director
Susan E. Hart
4867 Red Bay Drive
Orlando, FL 32829

ARTICLE VI THE REGISTERED AGENT NAME AND FLORIDA STREET ADDRESS

Susan E. Hart
4867 Red Bay Drive
Orlando, FL 32829


ARTICLE VII THE NAME AND ADDRESS OF THE INCORPORATOR

Marc A. Payne
2826 Shader Road
Orlando, FL 32808

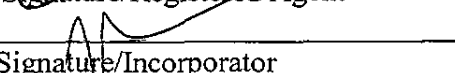
ARTICLE VIII EFFECTIVE DATE

The effective date for this Corporation shall be:
January 1, 2006

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.



Signature/Registered Agent



Signature/Incorporator

12-12-05

Date
12/14/05

Date

FILED
05 DEC 16 AM 8:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA