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March 31, 1998

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Florida Secretary of State  
P.O. Box 6327  
Tallahassee, Florida 32314

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-04/02/98--01060--001  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Re: Advocare Homes of Florida, Inc.

Dear Sir/Madam:

Enclosed please find our Application for Authorization to do Business in Florida for Advocare Homes of Florida, Inc. along with a Certificate of Existence for the same. Also enclosed is our check for the \$70.00 filing fee. Upon completion of the filing, please return a copy to me at the above address. If you should have any questions or concerns, please feel free to contact me.

With best wishes, I am

Sincerely yours,

MANNING, FULTON & SKINNER, P.A.

*Brenda W. Coleman*

Brenda W. Coleman  
Legal Assistant

BWC/c  
Enclosures

FILED  
SECRETARY OF STATE  
APR -2 PM 4:00

mtm  
3/2

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS  
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE  
STATE OF FLORIDA:

1. Advocare Homes of Florida, Inc.  
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. North Carolina 3. applied for  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. March 4, 1998 5. perpetual  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. upon qualification  
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.))
7. 4221 Highway 150 East  
Brown Summit, North Carolina 27214  
(Current mailing address)
8. Management of Rest Homes  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)  
Name: Anthony R. Mosca  
Office Address: 1537 Blackmoor Dr  
Orlando, Florida, 32837  
(Zip Code)

## 10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

By:

Anthony R Mosca  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address **ONLY**- P.O. Box **NOT** acceptable)

**A. DIRECTORS (Street address only- P.O. Box NOT acceptable)**

Chairman: Daniel D. Mosca

Address: 4221 Highway 150 East

Brown Summit, North Carolina 27214

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS (Street address only- P.O. Box NOT acceptable)**

President: Daniel D. Mosca

Address: 4221 Highway 150 East

Brown Summit, North Carolina 27214

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Beth C. Mosca

Address: 4221 Highway 150 East

Brown Summit, North Carolina 27214

Treasurer: Beth C. Mosca

Address: 4221 Highway 150 East

Brown Summit, North Carolina 27214

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

✓ 13. 

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application.)

14. Daniel D. Mosca, President

(Typed or printed name and capacity of person signing application)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 APR -2 PM 4:00

# STATE OF NORTH CAROLINA



Department of The  
Secretary of State

## CERTIFICATE OF EXISTENCE

I, **ELAINE F. MARSHALL**, *Secretary of State of the State of North Carolina*, do hereby certify that

**ADVOCARE HOMES OF FLORIDA, INC.**

*is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 4th day of March, 1998, with its period of duration being perpetual.*

I **FURTHER** *certify that the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.*

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

98 APR -2 PM 4:00



**IN WITNESS WHEREOF**, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 30th day of March, 1998.

*Elaine F. Marshall*

Secretary of State