## NOODOOOS State

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

3000037678833
-02/26/0101107007
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SUBJECT: AAACS, Incorporate NAME-MUST INCLUDE SUFFIX)					
Enclosed is an original a  \$70.00 Filing Fee	nd one (1) copy of the art \$\hbegin{align*} \hat{8}78.75 \\ Filing Fee & \\ Certificate of \\ Status	icles of incorporation and  \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 REF	01 MAR -5 PM 12: 56	FILED

FROM: AAACSI In Corporated

Name/(Printed or typed)

417 LIDO WAY NE

Address

ST. Petersburg, FL 33704

City, State & Zip

727-823-1291

Daytime Telephone number

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

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## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 27, 2001

ANGELA TURNER 417 LIDO WAY NE ST PETERSBURG, FL 33704

SUBJECT: AAACSI

Ref. Number: W01000004498

We have received your document for AAACSI and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Section 617.0803, Florida Statutes, requires that the board of directors never have fewer than three directors.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6928.

Tim Burch Document Specialist

Letter Number: 601A00012334

In Compliance with Chapter 617, F.S., (Not for Profit)					
ARTICLE I NAME	FILED				
The name of the corporation shall be:	01 HAR -5 PM 12: 56				
AAACSI, incorporated	· ·				
ARTICLE II PRINCIPAL OFFICE	TALLAHASSEE, FLORIDA				
The principal place of business and mailing address of this corp	poration shall be:				
	ST. Petersburg, FL 33704				
The purpose for which the corporation is organized is:	· · · · · · · · · · · · · · · · · · ·				
to engage in business asan Guardianship and Case Man	of for profit—as Professional agement Agency (cheritable)				
ARTICLE IV MANNER OF ELECTION The manner in which the directory					
The manner in which the directors are elected or appointed:	· · · · · · · · · · · · · · · · · · ·				
By majority whe of	OFFICER 15				
ARTICLE V INITIAL DIRECTORS OFFICERS					
The name and addresses	a display Timple				
Matthew E. Turner and	Angela Merrer Davis				
417 LIDO WAY NE	alla pristi paris				
Mathew E. Turner and 417 LIDO WAY NE Stretersburg, FL 337					
ARTICLE VI INITIAL REGISTERED AGENT AND S	TREET ADDRESS				
The <u>name and Florida street address</u> of the registered agent is:					
Angela Turner 417 LIDO WAY NE					
ST. Petersburg FL 33704					
ARTICLE VII INCORPORATOR					
The name and address of the Incorporator is:					
Angela Turner 417 LIDO WAY NE					
OF PILOUS TURNED	16				
\$7 Petersburg FC 3370					
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.					
and accept the appointment as regist	ered agent and agree to act in this capacity.				
1/10	2-1-01				
Signature/Registered Agent	Date				
7770	0 ( 0)				
Signature/incorporator	_ <u>2 -1 - 0 1</u> Date				

y.