

TRANSMITTAL LETTER

NP Doc 000001/665

TALLAHASSEE
SECRETARY OF STATE
APR 15 1995

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

SUBJECT: Choice First Inc.
(proposed corporate name)

6000014482416
-04/05/95--01095-004
*****78.75 *****78.75

Enclosed is an original and one (1) copy of the articles of incorporation and our check for \$ 78.75 .

FROM:

Choice First Inc.
Name (printed or typed)
P.O. Box 215
Address
Mary Esther Fl. 32569
City, State, & Zip
(904) 581-4353
Telephone Number

4/7/95
(Signature)

Note: Please provide the original and one copy of the Articles.

ARTICLES OF INCORPORATION

FOR

Choico First Inc.

RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
JAN 11 1977

The undersigned, acting as incorporator(s) of a corporation pursuant to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be: Choico First Inc.

ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

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

P.O. Box 215
Mary Esther Fl. 32569

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is (are):

To provide community services to those in need of special training, or private home assistance.

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is as follows:

Will be elected by current directors requiring unanamous vote.

ARTICLE V LIMITATION OF CORPORATE POWERS

The corporate powers of this corporation are as provided in section 617.0302, Florida Statutes, unless limited as follows: N/A

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Debra Franzen
23 Cactus Road
Mary Esther Fl. 32569

ARTICLE VII INCORPORATORS

The name(s) and street address(es) of the incorporator(s) for these Articles of Incorporation is(are):

Debra Franzen
23 Cactus Road
Mary Esther Fl. 32569

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this
31 day of March, 19 95.

Signature(s) of the Incorporator(s)

Debra Franzen

Debra Franzen

Typed name of incorporator signing

Typed name of incorporator signing

Typed name of incorporator signing

12. Names and addresses of officers and/or directors:

A. Directors:

Chairman: Terrance Keefe
Address: 23 Cactus Road
Mary Esther Fl. 32569

Vice Chairman: Debra Franzen
Address: 23 Cactus Road
Mary Esther Fl. 32569

Director: Debra Franzen
Address: 23 Cactus Road
Mary Esther Fl. 32569

Director: _____
Address: _____

B. Officers:

President: Debra Franzen
Address: 23 Cactus Road
Mary Esther Fl. 32569

Vice President: Terrance Keefe
Address: 23 Cactus Road
Mary Esther Fl. 32569

Secretary: Debra Franzen
Address: 23 Cactus Road
Mary Esther Fl. 32569

Treasurer: Debra Franzen
Address: 23 Cactus Road
Mary Esther Fl. 32569

(If needed, 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. _____
(Type or print name and capacity of person signing application)

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 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: _____
Choice First Inc.

2. The name and address of the registered agent and office is:
Debra Franzen
(NAME)

23 Cactus Road
(P.O. BOX NOT ACCEPTABLE)

Mary Esther Fl. 32569
(CITY/STATE/ZIP)

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.

SIGNATURE Debra Franzen

DATE 3/27/95