RANSMITTA Department of State **Division of Corporations** P. O. Box 6327 -07713795---0 \*\*\*\*\*\*78, 75 Tallahassee, FL 32314 \*\*\*\*\*78,75 SUBJECT: (Proposed corporate name - must include suffix) Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$70.00 \$78.75 \$122.50 \$131.25 Filing Fee Filing Fee **Filing Fee** Filing Fee, & Certificate & Certified Copy Certified Copy & Certificate FROM: \_\_\_\_\_Elizabette J. Ends/er Name (Printed or typed) <u>P. O. Box 435</u> Address CROSS City Florida 32625 City State & Zip 904-498-4158 Daytime Telephone number NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 17, 1995

ELIZABETH J. ENDSLEY POST OFFICE BOX 435 CROSS CITY, FL 32628

SUBJECT: ENDSLEY MANOR INC. Ref. Number: W95000014326

We have received your document for ENDSLEY MANOR INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the corporation is being organized.

Please return 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 (904) 487-6878.

Terri Buckley Corporate Specialist

Letter Number: 795A00034125

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

## ARTICLES OF INCORPORATION

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

> ARTICLE I Name

The name of the corporation snall be:

ENDSley MANOF INC

**ARTICLE II** Principal place of business and mailing address The principal place of business and mailing address of this corporation shall be:

P.O. Bux 435 - 401 STOCKAde Road CROSS City FIORIDA 32628

### **ARTICLE III**

Purpose(s)

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

STARTING AN ACLY business STATE LEANSES Adult LIVING FACILITY IN which we will house & feed recipilitis of OSS, MEDICARE, MEDICAND & PRIVATE PAY VESIdenTS.

ARTICLE IV Manner of election of directors The manner in which the directors are elected or appointed is as follows:

By LAWS of The CORPORATIONS

### ARTICLE V Limitation of corporate powers

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

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

Elizabeth J. ENDSLAY Do. Box 435 CEOSS City, Florida 32628

#### ARTICLE VII Incorporators

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

Elizabeth J. ENDSley P.O. Box 435 CROSS City FT. 32628

The undersigned incorporator has executed these Articles of Incorporation this 2/2 day of \_\_\_\_\_

July\_\_\_\_, 19 <u>45</u>

Signature of Incorporator:

Elizabeth J. Endaly

Typed name of incorporator signing

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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:

(muet include suffix)	
/ (muet include suffix)	
2. The name and address of the registered agent and office is:	
Elizabeth J. ENDSley	
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)	
CROSS C: ty Horida 3260 (CITVSTATE/ZIP)	2.2

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.

Elizabeth 1. Endeling (SIGNATURE)