

SUBJECT: THE DURKAN-TCHORZ REHABILITATION FUND, INC.
(Proposed corporate name - must include suffix)

Dear Sir or Madam:

Enclosed is original and one (1) copy of the articles of incorporation and a check for:

Filing Fee

X \$78.75
Filing Fee
& Certificate

\$122.50 Filing Fee & Certified Copy

____ \$131.25
Filing Fee
& Certified Copy

& Certificate

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-12/03/96--011/8--0.7
-++++78.75 ++++78.75

SUSAN DURKAN, RNC, BSN
Name (printed or typed)

2202 COLONIAL DR.
Address

MELBOURNE, FL 32901
City, State, & Zip

407-635-2188 PAGER
Telephone number

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

ARTICLES OF INCORPORATION

The undersigned, acting as incorporator(s) pursuant to chap or 6-7, Florida Statutes, adopt(s) the following Articles of Incorporation:

ARTICLE I

The name of the corporation shall be:

THE DURKAN-TCHORZ REHABILITATION FUND, INC

ARTICLE II

Principal place of business and mailing address

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

THE HENEGAR CENTER
625 E. NEW HAVEN AVE. SUITE 215
MELBOURNE, FL 32901

ARTICLE III
Purpose(s)

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

THE PURPOSE OF THE DURKAN-TCHORZ REHABILITATION FUND IS TO ASSIST WITH THE FINANCIAL NEEDS OF IDENTIFIED RECIPIENTS AS A RESULT OF A CATASTROPHIC EVENT. THE FUND WAS ESTABLISHED AS A COMMUNITY SERVICE FOR INDIVIDUALS AND THEIR FAMILIES TO COPE WITH THE COST OF CONTINUING HEALTH CARE. FUND RAISING EVENTS, COMMUNITY AND CORPORATE DONATIONS AND INDIVIDUAL CONTRIBUTIONS WILL AID THIS EFFORT.

ARTICLE IV
Manner of election of directors

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

THE OFFICERS/DIRECTORS WILL BE APPOINTED BY THE INCORPORATORS.

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:

NO LIMITATIONS

ARTICLE VI
Initial registered agent and st tet address

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

SUSAN DURKAN 2202 COLONIAL DR. MELBOURNE, FL 32901

ARTICLE VII Incorporators

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

SUSAN DURKAN 2202 COLONIAL LR. MELBOURNE, FL 32:901

DEBBIE TCHORZ 2298 SEPTEMBER ST. MELBOURNE, FL 32935

The undersigned incorporator has executed the Articles of Incorporation this <u>25th</u> day of <u>SEPTEMBER</u>, 19 <u>96</u>.

Signature of Incorporator S

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	cor	poration	is:
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THE DURKAN-TCHORZ REHABILITATION FUND, INC (Must include suffix)

2.	The name and address of the registered agent and office is:			
	SUSAN DURKAN	SECA FALLA	96 D	ent contract
	(NAME)	LAHASSE	DEC -2	e introduce Committee
	2202 COLONIAL DR.	¥Ω.	70	ii Talongan
	(P.O. Box or Mail Drop Box NOT Acceptable)	וי־וי	:÷ H	
	MELBOURNE, FL 32901 (City/State/Zip)	STATE LORIDA	23	Securit'

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.

Suran Ulun Kay	9/25/96
(Signature)	(Date)