

TRANSMITTAL LETTER

N 98000006675

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

SUBJECT: UnLIMBited Amputee Support Group, Inc  
(Proposed corporate name - must include suffix)

400002691214--3  
-11/19/98-01031--003  
\*\*\*\*131.25 \*\*\*\*\*87.50

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

<input type="checkbox"/> \$70.00	<input type="checkbox"/> \$78.75	<input type="checkbox"/> \$122.50	<input checked="" type="checkbox"/> \$131.25
Filing Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate

FROM: Susan M. O'Connor  
Name (Printed or typed)

123 S. Industrial Dr. Ste 104  
Address

Orange City, Fl 32763  
City, State & Zip

(904) 775-2800  
Daytime Telephone number

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 NOV 19 AM 11:27

F. CHESSEB NOV 24 1998

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

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ARTICLES OF INCORPORATION  
UnLIMBited Amputee Support Group, Inc.

ARTICLE I

The name of the corporation shall be: UnLIMBited Amputee Support Group, Inc.

ARTICLE II

The principal place of business and mailing address of this corporation shall be: 123 S. Industrial Dr Suite 104 Orange City, Fl 32763

ARTICLE III

The specific purpose for which the corporation is organized is: Serving as a social and emotional support group for people experiencing amputation or with a physical disability requiring emotional support. Additionally, assisting members and their families with information and guidance, providing educational programs for members and the public.

ARTICLE IV

The manner in which the directors are elected or appointed is as follows: The members shall elect the officers at its annual meeting. The Officers shall serve a two (2) year term of office and may be reelected for three (3) additional terms by a majority of members present at the annual meeting.

ARTICLE V

The corporate powers of this corporation are provided in section 617.0302, Florida Statutes.

ARTICLE VI

The name and the street address of the initial registered agent is: Susan M. O'Connor, 123 S. Industrial Dr Suite 104 Orange City, Fl 32763

ARTICLE VII

The name and street address of the incorporator for these articles of incorporation is: Susan M. O'Connor, 123 S. Industrial Dr Suite 104 Orange City, Fl 32763

The undersigned incorporator has executed these Articles of Incorporation this 10<sup>th</sup> day of Nov., 1998.

Signature of Incorporator:

Susan M. O'Connor

SUSAN M. O'CONNOR  
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:

UnLIMBited Amputee Support Group, Inc  
(must include suffix)

2. The name and address of the registered agent and office is:

Susan M. O'Connor  
(NAME)

123 S. Industrial Dr Ste 104  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Orange City Fl 32763  
(CITY/STATE/ZIP)

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*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.*

Susan M O'Connor  
(SIGNATURE)

11/16/98  
(DATE)