

N99 00000 4466  
TRANSMITTAL LETTER

FILED  
99 JUL 20 PM 1:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

SUBJECT: NURSING HOME COUNSELING CENTER INC  
(Proposed corporate name - must include suffix)

300002936223--0  
-07/20/99--01057--010  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

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

\$70.00  
Filing Fee

\$78.75  
Filing Fee &  
Certificate of  
Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM: LINDA ARONBERG  
Name (Printed or typed)

3519 N.W. 61<sup>ST</sup> CIRCLE  
Address

BOCA RATON FL 33496  
City, State & Zip

609 - 354-1415 561-998-9370  
UNTIL OCT. 1<sup>ST</sup> Daytime Telephone number

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

Linda GAVE  
AUTHORIZATION BY PHON  
CORRECT Election  
DATE 7-27-99  
FOR EXAM 7c

F. GHESSER JUL 27 1999

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

FILED  
99 JUL 20 PM 1:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

NURSING HOME COUNSELING CENTER,

ARTICLE II PRINCIPAL OFFICE

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

3519 N.W. 61ST CIRCLE  
BOCA RATON FLORIDA 33496

ARTICLE III PURPOSE(S)

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

TO PROMOTE THE PROPER CARE & TREATMENT  
OF THE ELDERLY IN NURSING HOMES. TO HELP  
CORRECT THE MISTREATMENT OF ELDERLY.

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

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

BY MAJORITY VOTE OF SHAREHOLDERS AT MEETING.

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

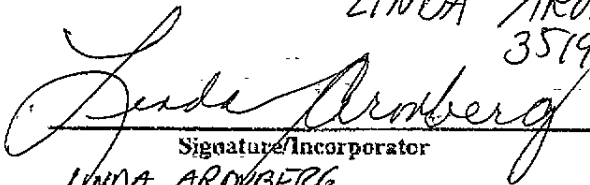
The name and Florida street address of the initial registered agent are:

LINDA ARONBERG  
3519 N.W. 61ST CIRCLE  
BOCA RATON, FL 33496

ARTICLE VI INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation are:

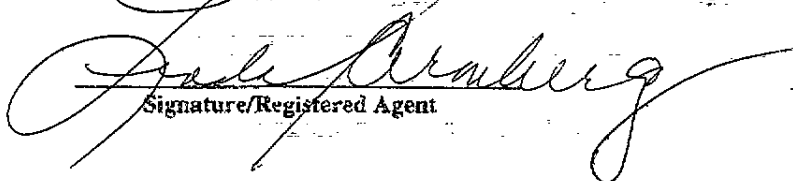
LINDA ARONBERG  
3519 N.W. 61ST CIRCLE  
BOCA RATON FLORIDA 33496  
7-15-99

  
Signature/Incorporator  
LINDA ARONBERG

Date

(An additional article must be added if an effective date is requested.)

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/Registered Agent

7-15-99  
Date