TRANSMITTAL LETTER				
1000	000	133	36	
Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314				
SUBJECT: Elder Care Solo (Proposed corpo	1 fions, Include su	ffix)	 .	
Enclosed is an original and one(1) copy of the article		100003121 -02/02/00- *****87.50 a check for :	LO312 01077-006 *****87.50	
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
FROM: <u>Jacqueline</u> Name (Pr	e A. Meier inted or typed)			
14101 Fala	ddress ddress	P A Park		
JOCG Veline Meier GAVE UTHORIZATION BY PHONE TO 127 ORRECT CORP NOME Daytime Te	Florida 34 State & Zip 868-8580 Iephone number	00 FEB -2 SECHLARS TALLAHASS	Constitution of the consti	
ATE 07-08-00 OC. EXAM (12)			Same and the same	

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

Jah

ARTICLES OF INCORPORATION

OF

ELDER CARE SOLU Frons, INC.

ARTICLE I	NAME

The name of this Corporation shall be:

ELDER CARE CONNECTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

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

14101 Faldo Court, Hudson, FL 34667

OD FEB -2 AM 8: 45
SECREMENT OF STATE
TALLANIASSEE, FLORIDA

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is ten thousand shares of common stock having a par value of one dollar (\$1.00) per share.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Jacqueline A. Meier, 14101 Faldo Court, Hudson, FL 34667

ARTICLE V INCORPORATOR

The <u>names and addresses</u> of the incorporator's of these Articles of Incorporation are:

Jacqueline A. Meier, 14101 Faldo Court, Hudson, FL 34667

Donna Lawlor, 14112 Faldo Court, Hudson, FL 34667

Donna Lawlor, 14112 H

1-31-00

Date

1-3/-00

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

1-31-00

Date