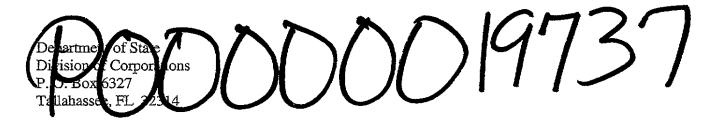
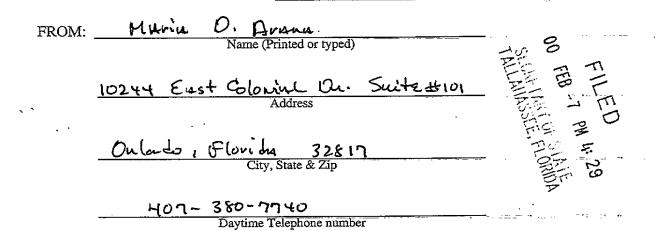
### TRANSMITTAL LETTER



SUBJECT: EUST	Funily Care	Center	Inc.		
EFFECTIVE DATE	(Proposed corp	porate name - must i	nclude suffix)	003125 02/07/000; *****87.50	7992 1102011 ******
-1-0c					www.m.01.*00
Enclosed is an original an	d one(1) copy of the artic	cles of incorporat	ion and a chec	k for:	
Enclosed is all original in	a one(1) copy or are are.	- Liverpoin	1011 11110 11 11111		7

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□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
			ADDITION AND ADDITION OF A DESCRIPTION O		



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

W·3547



# FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 10, 2000

MARIA ARAMA 10244 EAST COLONIAL DR., STE. #101 ORLANDO, FL 32817

We have received your document for EAST FAMILY CARE CENTER and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the original and one copy of 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 (850) 487-6926.

Cheryl Gallmon-Case Document Specialist

Letter Number: 800A00006977



# ARTICLES OF INCORPORATION OF EAST FAMILY CARE CENTER, Inc.



THE UNDERSIGNED SUBSCRIBERS TO THESE ARTICLES OF INCORPORATION, A NATURAL PERSON COMPETEN TO CONTRACT, HEREBY FORMS A CORPORATION UNDER THE LAWS OF THE STATE OF FLORIDA .

#### ARTICLEC I. NAME

THE NAME OF THE CORPORATION EAST FAMILY CARE CENTER, INC.

#### **ARTICLE 11. ADDRESS**

THE ADDRESS OF THE PRINCIPAL OFFICE OF THIS CORPORATION WILL BE : EAST COLONIAL DR. SUITE #101 ORLANDO, FLORIDA 32817. ORANGE COUNTY

## **ARTICLE 111 . NATURE OF BUSINESS**

THIS CORPORATION MAY ENGAGE OR TRANSACT IN ANY OR ALL LAWFUL ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES OF AMERICA , THE STATE OF FLORIDA OR ANY OTHER STATE , COUNTRY , TERRITORY OR NATION .

### ARTICLE 1V. CAPITAL STOCK

THE MAXIMUN NUMBER OF SHARE OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY TIME IS 20,000 OF COMMON STOCK, AT \$1.00 PAR VALUE. THE BOARD OF DIRECTORS SHALL FIX AND DETERMINE THE VOTING AND NON - VOTING RIGHTS OF EACH ISSUE OF SHARES OF COMMON STOCK.

## ARTICLE V . TERM OF EXISTENCE

THIS CORPORATION SHALL HAVE PERPETUAL EXITENCE.

# ARTICLE V1. TITLES OF DIRECTORS CONSTITUTING INITIAL BOARD OF DIRECTORS

THE INITIAL BOARD OF DIRECTORS OF THE CORPORATION SHALL CONSIST OF THREE DIRECTORS. THE NUMBER OF DIRECTOR OF THE CORPORATION SHALL SPECIFIED FROM TIME TO TIME, BY THE BYLAWS PROVIDED, HOWEVER, THE NUMBER OF DIRECTORS SHALL NEVER BE LESS THAN THREE. THE NAME AND ADDRESSES OF THE INITIAL DIRECTORS FOR THE CORPORATION ARE:

	TITLE	COMMON STOCKS - CLASS A
ADALBERTO ARANA JR. MD.	PRESIDENT & CHAIRMAN	55 PERCENT ( % )
MARIA D. ARANA	SECRETARY & TREASURY	35 PERCENT ( % )
JORGE ARANA	DIRECTOR & OFFICER	10 PERCENT ( % )

ADALBERTO ARANA JR. MD.

TITLE

**PRESIDENT & CHAIRMAN** 

Marie D Cleve

**SECRETARY & TREASURY** 

MARIA D. ARANA

*JORGE* A. ARANA

**DIRECTOR & OFFICER** 

### ARTICLE VII. INCORPORATOR

NAME

**ADDRESS** 

ADALBERTO ARANA JR. MD.

8575 CHICKASAW FARM ORLANDO, FL. 32825

TELEPHONE: 407-381-4385

MARIA D. ARANA

8575 CHICKASAW FARM ORLANDO, FL. 32825

TELEPHONE: 407-381-4385

**JORGE A. ARANA** 

8575 CHICKASAW FARM ORLANDO, FL. 32825

TELEPHONE: 407-381-4385

### ARTICLE VIII. BYLAWS

THE POWER TO ADOPT , ALTER , AMEND , OR REPEAL BYLAWS SHALL BE VESTED IN THE BOARD OF DIRECTORS OR SHAREHOLDERS .

ARTICLE 1X. EFFECTIVE DATE

THE EFFECTIVE DATE WILL BE FEBRUARY 1 , 2000 .

# CERTIFICATE DESIGNATING PLACE OF BUSINES FOR THE SERVICES OF PROCESS WITHIN FLORIDA AND REGISTERED AGENT UPON WHOM PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTIONS 48.091 AND 607.325 , FLORIDA STATUTES THE FOLLOWING IS SUBMITTED :

EAST FAMILY CARE CENTER INC. DESIRING TO ORGANAIZE AS A DOMESTIC CORPORATION OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA HAS NAMED AND DESIGNATED, MARIA D. ARANA AS ITS REGISTERED AGENT TO ACCEPT SERVICES OF PROCESS WITHIN THE STATE OF FLORIDA WITH ITS REGISTERED OFFICE LOCATED AT; 10244 EAST COLONIAL DR. SUITE # 101 ORLANDO, FLORIDA 32817. ORANGE COUNTY

#### **ACKNOWLEDGMENT**

HAVING BEEN NAMED AS REGISTERED AGENT FOR THE CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY: AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF THE FLORIDA BUSINEE CORPORATION ACT, AS THE SAME MAY APPLY TO THE CORPORATION RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES AS REGISTERD AGENT.

DATED THIS JANUARY 31, 2000.

MARIA D. ARANA REGISTERED AGENT FIRST STATE