P00000036834

TRANSMITTAL LETTER

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

SUBJECT: Twelve Oaks Assisted Living Facility, Inc.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

900003200449--2
-04/07/00--01099--009
*****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 of Status

ADDITIONAL COPY REQUIRED

FROM: Jason Uhlinger
Name (Printed or typed)

10400 Drew Bryant Dr
Address

Floral City FL 34436
City, State & Zip

352-637-2020
Daytime Telephone number

FILED
00 APR -7 AM 10:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

T BROWN APR 12 2000

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED
00 APR -7 AM 10:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Twelve Oaks Assisted Living Facility, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

10400 Drew Bryant Dr.
Floral City FL 34436

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Assisted Living Facility

ARTICLE IV SHARES

The number of shares of stock is:

250

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

President James D. Uhlinger Sr.
10400 Drew Bryant Dr.
Floral City FL 34436

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** of the registered agent is:

Jason Uhlinger
10400 Drew Bryant Dr.
Floral City FL 34436

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

James D. Uhlinger Sr.
10400 Drew Bryant Dr.
Floral City FL 34436

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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent — Date: 04/06/00

James D. Uhlinger Sr.
Signature/Incorporator — Date: 04/06/00