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Florida Department of State  
Division of Corporations  
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**FLORIDA PROFIT CORPORATION OR P.A.  
LONG TERM CARE INDEPENDENT AGENTS ASSOC. INC.**

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## Articles of Incorporation

Article 1: Name of Corporation: **LONG TERM CARE INDEPENDENT AGENTS ASSOC. INC.**

Address of Corporation: **372 MINOLA DRIVE  
MIAMI SPRINGS, FLORIDA 33166**

Article 2: Capital Stock: The number of shares which the corporation has authorized to be outstanding at any one time is **5,000**, with a par value of **\$1.00**.

Article 3: REGISTERED AGENT: **LYNN FIELDS**

REGISTERED OFFICE: **372 MINOLA DRIVE  
MIAMI SPRINGS, FLORIDA 33166**

\*I am familiar with and hereby accept the duties and responsibilities as Registered Agent for said corporation.

*Lynn Fields*

Signature of Registered Agent

Article 4: The Board of Directors are: (Board of Directors is NOT REQUIRED).  
First listed is President, Second is Vice President, then Secretary/Treasurer.

1. **LYNN FIELDS, 372 MINOLA DRIVE, MIAMI SPRINGS, FLORIDA 33166**
2. **JOHN CHESTER FIELDS, 372 MINOLA DRIVE, MIAMI SPRINGS, FLORIDA 33166**
3. **LYNN FIELDS, 372 MINOLA DRIVE, MIAMI SPRINGS, FLORIDA 33166**

Article 5: The NAME and ADDRESS of the INCORPORATOR is:

**LYNN FIELDS  
372 MINOLA DRIVE  
MIAMI SPRINGS, FLORIDA 33166**

In witness whereof, I have subscribed my name:

*Lynn Fields*

Signature of Incorporator

**H00-40852**