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TRANSMITTAL LETTER

FILED
00 SEP -1 AM 9:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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-09/01/00--01027--016
*****87.50 *****87.50

SUBJECT: Vision Retirement Center, Inc.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

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: Romuald Aristide
Name (Printed or typed)

615 Seascape Ave.
Address

Orlando, FL 32828
City, State & Zip

407 282-2584
Daytime Telephone number

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

D. BROWN SEP - 7 2000

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ARTICLES OF INCORPORATION

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Vision Retirement Center, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1611 Elizabeth St.
Melbourne, FL 32901

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in every phase and aspect of the business of rendering assisted living care to the public, as an ALF, duly licensed uned the laws of the State of Florida, is authorized to render, but such services shall be rendered only through officers, employees and agents of this Corporation.

ARTICLE IV SHARES

The number of shares of stock is:

1,000 shares of $1.00 par value common stock

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Directors

Romuald Aristide 615 Seascape Ave.
Orlando, FL 32828
Betty Aristide

ARTICLE VI REGISTERED AGENT

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

Romuald Aristide
615 Seascape Ave.
Orlando, FL 32828

ARTICLE VII INCORPORATOR

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

Romuald Aristide
615 Seascape Ave.
Orlando, FL 32828

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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: 8-29-00

Signature/Incorporator — Date: 8-29-00