

TRANSMITTAL LETTER

P00000089516

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

FILED  
00 SEP 20 PM 12:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: SHIRLEY HEALTH SERVICES IN  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

600003399776--2  
-09/20/00--01086--016  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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: SHIRLEY ANN NICKERSON  
Name (Printed or typed)

1728 TALLOWAY STREET  
Address

ORLANDO FL 32818  
City, State & Zip

407 872 8462  
Daytime Telephone number

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

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## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

### ARTICLE I NAME

The name of the corporation shall be:

SHIRLEY HEALTH SERVICES INC.

### ARTICLE II PRINCIPAL OFFICE

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

1411 N. PINE HILLS ROAD  
ORLANDO FL 32808

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ONE THOUSAND FIVE HUNDRED

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

SIRLEY ANN NICKERSON  
1728 TALLOWAY STREET  
ORLANDO FL 32818

### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

SHIRLEY ANN NICKERSON  
1728 TALLOWAY STREET  
ORLANDO FL 32818

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S. Nickerson

Signature/Incorporator

09 - 03 - 00

Date

(An additional article must be added if an effective date is requested.)

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

S. Nickerson

Signature/Registered Agent

09 - 03 - 00

Date