# POODOOOS TRANSMITTAL LETTER 3827

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

SUBJECT:

600003381506---3 -09/05/00--01071--020 \*\*\*\*\*\*78.75 \*\*\*\*\*\*78.75

Enclosed is an origina	al and one(1) copy of the arti	cles of incorporation and a	check for:
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: Nicholas FANELLA FINE =  Name (Printed or typed)  434 TANGLE Wood DRIVE  Address			
	FORT U	11001033	Beach FL 32547

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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



# FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 11, 2000

NICHOLAS FANELLA 434 TANGLEWOOD DRIVE FORT WALTON BEACH, FL 32547

SUBJECT: SUNRISE MARKETING, INC.

Ref. Number: W00000022111

We have received your document for SUNRISE MARKETING, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

# Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 487-6928.

Letter Number: 900A00047755

Tim Burch Document Specialist

Division of Corporations - P.O. ROY 6327, Tallahassaa, Florida 32314

#### 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 SUNRISE HEALTH CARE, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 434 Tanglewood Drive Fort Walton Beach, FL 32547

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: One Thousand (1000) shares

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Nicholas R. Fanella 434 Tanglewood Drive Fort Walton Beach, FL 32547

ARTICLE V INCORPORATOR

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

Nicholas R. Fanella 434 Tanglewood Drive Fort Walton Beach, FL 32547

1 TOIL Walton Beauty 1 L 32347

Signature/Incorporator

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

Signature/Registered Agent

Date

SECRETARY OF ST

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