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TRANSMITTAL LETTER

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

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-10/19/00--01101--017
*****87.50 *****87.50

SUBJECT: KATHRYN JACOBS CASE MANAGEMENT & CONSULTING, 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: Stuart C. Hoffman
Name (Printed or typed)

2600 N. Military Trail, Suite 290
Address

Boca Raton, Florida 33431
City, State & Zip

(561) 241-3220
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 OCT 19 AM 11:12

FILED

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

gr 10/20

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:

KATHRYN JACOBS CASE MANAGEMENT & CONSULTING, INC.

ARTICLE II PRINCIPAL OFFICE

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

2500 Cranbrook Drive, Boynton Beach, Florida 33436

ARTICLE III SHARES

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

7500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Kathryn Jacobs
2500 Cranbrook Drive, Boynton Beach, Florida 33436

ARTICLE V INCORPORATOR

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

Kathryn Jacobs
2500 Cranbrook Drive, Boynton Beach, Florida 33436

Kathryn Jacobs
Signature/Incorporator

10/16/00
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

Kathryn Jacobs
Signature/Registered Agent

10/16/00
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA