

FILED

00 OCT 23 AM 9: 06

LECKETARY OF STATE FALLAHASSEE, FLORIDA

700003435917--7 -10/24/00--01004--002 ****122.50 ******78.75

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

Subject: A Society for Seniors, Inc.

(Proposed corporate name - must include suffix)	
Enclosed is an original and one (1) copy of the ar	rticles of incorporation and a check
()\$70.00 ()\$78.75 (X)\$122.50	() \$131.25
•	
From:	Mrs. Tracie L. Sturm Name
	1901 NW 49th Ave. Address
•	Coconut Creek, FL 33063 City, State & Zip
	(954) 957-9160

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

Daytime Telephone number

PH 10/24/50

ARTICLES OF INCORPORATION

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SLUMETARY OF STATE TALLAHASSEE, FLORIDA

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

ARTICLE | NAME

The Name of the corporation shall be:

A Society for Seniors, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1901 NW 49th Ave. Coconut Creek, FL 33063

ARTICLE III SHARES

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

1,000 shares of common

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Mrs. Tracie L. Sturm 1901 NW 49th Ave. Coconut Creek, FL 33063

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

Mrs. Tracie L. Sturm 1901 NW 49th Ave. Coconut Creek, FL 33063

The undersigned in	corporator(s) has(have) executed these Articles of Incorporation this
Fifth (5th)	day of October_, 2000.
	signature
	signature

Article of Incorporation Filling Fee - \$35

CERTIFICATE OF DESIGNATION OF LED 00 0CT 23 AM 9: 06

REGISTERED AGENT/REGISTERED OF FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	A Society for Seniors, Inc.	
2. The name and address of the register	ed agent and office is:	
	Mrs. Tracie L. Sturm	
	(Name)	
	1901 NW 49th Ave. (P.O. Box not acceptable)	
	Coconut Creek, FL 33063	
	(City/State/Zip)	

Having been named as registered agent and to accept service of process for the above state 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)