

PO1000007075

TRANSMITTAL LETTER

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

400003551664--6
-01/17/01--01055--009
*****87.50 *****87.50

SUBJECT: SPECIAL TOUCH HEALTHCARE 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: SPECIAL TOUCH HEALTHCARE INC.
Name (Printed or typed)

2346 SW 5TH PL.

Address

OCALA, FL. 34475

City, State & Zip

(352) 629-4100

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 JAN 17 AM 9:31

FILED

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

gyl/19

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Special Touch Healthcare INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5400 NW 2ND Street

Ocala, Fl. 34475

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any And All LAWFUL BUSINESS in the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: (500)

Five Hundred

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Tikisha Patterson- Pres. 7 Dir.-2346 SW 5TH Pl. Ocala, Fl. 34474

Geraldine Patterson- Sec. /Dir.- 2346 SW 5TH Pl. Ocala, Fl. 34474

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Tikisha Patterson

5400 NW 2ND St.

Ocala, Fl. 34475

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Tikisha Patterson 2346 SW 5TH PL. Ocala, Fl. 34474

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

✓ Tikisha Patterson
Signature/Registered Agent

✓ 1-15-01
Date

✓ Tikisha Patterson
Signature/Incorporator

✓ 1-15-01
Date

FILED
01 JAN 17 AM 9:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA