

TRANSMITTAL LETTER

PO1000075438

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

SUBJECT: Southeast Long Term Care Inc.
(Proposed corporate name - must include suffix)

400004507804--1
-07/30/01-01119-017
*****70.00 *****70.00

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: IncyourBIZ Corp
Name (Printed or typed)

P.O. Box 13092

Address

Tucson AZ 85732

City, State & Zip

520 881 3989

Daytime Telephone number

2001 JUL 30 AM 10:44
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

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

8/1/01

* ARTICLES OF INCORPORATION

FILED

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: Southeast Long Term Care Inc.

2001 JUL 30 AM 10:44
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 7772 Nile River Road, West Palm Beach, FL 33411.

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 200.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: Samuel M. Schurr 7772 Nile River Road, West Palm Beach, FL 33411.

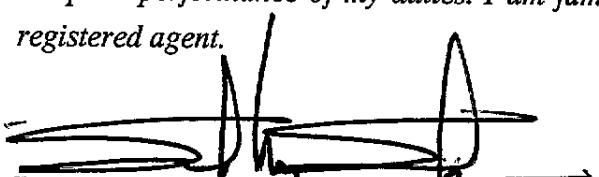
ARTICLE V INCORPORATOR

The name and mailing address of the incorporator of these Articles of Incorporation is: Mariclare Hannah PO Box 13092, Tucson AZ 85732. The street address, if required, is 3938 E. Grant Road, #453, Tucson, AZ, 85712.

Mariclare Hannah
Mariclare Hannah, Incorporator

July 25 2001
Date

As registered agent, I agree to accept service of process for the above named 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. I am familiar with and accept the obligations of my position as registered agent.



Samuel M. Schurr, Registered Agent

7-21-01

Date