PO COMMITA REFERS 59

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

	***	*¥70.00~	*****70.00
SUBJECT:	LIVING QUARTERS, INC. (Proposed corporate name - must include suffix)	·	£
Enclosed is an and a check for	original and one (1) copy of the articles of incore:	prporation	1
\$70.00 Filing Fee	Filing Fee Filing Fee Fi Certificate & Certified Copy Co of Status &	87.50 ling Fee, ertified Copy Certificate of tatus	
ं. अ			
	FROM: LORRAINE M. FADDEN	7	
	Name (Printed or Typed)	SECRE]	-
	4763 SILVER HERON DRIVE Address	ARY OF STA	FILED
	MELBOURNE, FLORIDA 32934 S City, State & Zip	: 57	
	321 - 259-2956		•

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

7011177 AUG 2 0 2001

ARTICLES OF INCORPORATION

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 I

The name of the corporation shall be:

LIVING QUARTERS, INC.

OI AUG IS AM 8: 57 SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

BUSINESS ADDRESS & MAILING ADDRESS: 4763 SILVER HERON DRIVE MELBOURNE, FLORIDA 32934

ARTICLE III SHARES

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

25,000 SHARES (COMMON VOTING)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the registered agent is: LORRAINE M. FADDEN 4763 SILVER HERON DRIVE MELBOURNE, FLORIDA 32934

Filing Fee: \$ 70.00

ARTICLE V INCORPORATOR(S) See instructions for officers/directors

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

LORRAINE M. FADDEN 4763 SILVER HERON DRIVE MELBOURNE, FLORIDA 32934

The undersigned in Incorporation this	ncorporator(s) has(have) executed these Articles of, 2001.
<u>.</u>	Oblaine M Ladden Signature
-	Signature
-	Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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:	(must include suffix)	<u> </u>
2. The name and address of the regis	stered agent and office is:	O/, SECH TALLA
LORRAIN	VE M. FADDEN (Name)	AUG 15 AM ARETARY OF AHASSEE FI
4763_SII	LVER HERON DRIVE r Mail Drop Box NOT Acceptable)	M 8: 57 STATE LORIBA
<u>MELBOL</u>	JRNE, FLORIDA 32934 (City/State/Zip)	

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.

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(Signature) (Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314