TRANSMITTAL LETTER Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$70.00 \$78.75 **378.75 \$** \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: Name (Printed or typed)

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

A DTICLES OF INCORDOR ATTON	
ARTICLES OF INCORPORATION .	•
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	MAUE 2- ED
ARTICLE I NAME	Maria Maria
The name of the corporation shall be:	'AUG 27 2
Land Shall To A A A A A A A A A A A A A A A A A A	OREJA PAIR -
Long Shadow Inn Assisted Livin	Starility Inc.
	- SEE FLOOTE
ARTICLE II PRINCIPAL OFFICE	$\sim 10^{-3}$
The principal place of business/mailing address is:	
2275 Nebraska Avenue	
Pal III	
Palm Harbor, FL. 34683 ARTICLE III PURPOSE	- <u>.</u> _
	·. —·
The purpose for which the corporation is organized is:	
assisted Living facility - 24 hours care of elder residents	and supervision
of elder residents.	and eq in the
ARTICLE IV SHARES	
The number of shares of stock is:	
(000	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)	
The name(s) and address(es):	
I lata Campara (President & In	itial Othicer)
E310 Total 10 Di	
5348 Dartmouth Rd.	
New Port Richey FL. 34652	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	
I lata Campara 5348 Dartmouth Rd. New Port Richey FL 34652	-
5348 Dartmouth Rd	
New Port Richer El 34652	
ARTICLE VII INCORPORATOR	•
The <u>name and address</u> of the Incorporator is:	
Zlata Campara 5348 Dartmouth Rd.	
2048 Vartmouth Rd.	
New Port Richey FL. 34652 ************************************	
the state of the s	******
Having been named as registered agent to accept service of process for the above stated corporation certificate, I am familiar with and accept the appointment as registered agent and agree to act in this c	at the place designated in this
Transfer and the second and the seco	cupucay
I lata Campone	00 00
Z Lata Cauchara Signature/Registered Agent Date	08-22-01
Date	
$\nabla L + C$	
Signature/Incomparation	08-22-01
Signature/Incorporator Date	