

P01000115838

November 20, 2001

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

Re; LAKE WORTH FAMILY CARE CENTER, INC.
(name of corporation)

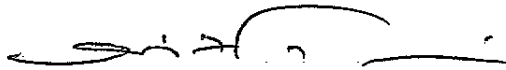
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-12/04/01--01061--013
122.50 *78.75

Gentlemen:

Enclosed please find the original and one copy of Article of Incorporation together with my check in the amount of \$ 122.50.

This represents the cost of the Filing fees, Certified Copy of Articles of incorporation and fee for registered Agent Designation for the above named corporation.

Very Truly Yours,



ANITA TARVAINEN

LAKE WORTH FAMILY CARE CENTER, INC.
(name of corporation)

MAILING ADDRESS OF CORPORATION _____

1201 SO. FEDERAL HWY., SUITE B

LAKE WORTH, FL. 33460

PHONE _____

(561)588-1992 EXT _____

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01 DEC -4 PM 4:02
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION
OF

LAKE WORTH FAMILY CARE CENTER, INC.
(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I * CORPORATE NAME

The name of the Corporation is:

LAKE WORTH FAMILY CARE CENTER, INC.

ARTICLE II * DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III * PURPOSE

This corporation is organized for the purpose of engaging in any activities of business permitted under the laws of the United States and the State of Florida.

ARTICLE IV * CAPITAL STOCK

The corporation is authorized to issue FIVE HUNDRED shares (500) of ONE Dollar(s) (\$1.00) par value Common Stock, which shall be designated "Common Shares".

ARTICLE V * INITIAL REGISTERED OFFICE AND AGENT

The principle office, if known, or the mailing address of the corporation is:

NAME
LAKE WORTH FAMILY CARE CENTER, INC.
ADDRESS
1201 SO. FEDERAL HWY., SUITE B
CITY STATE ZIP
LAKE WORTH FLORIDA 33460

ARTICLE VI * INITIAL BOARD OF DIRECTORS

This corporation shall have ONE (1) Directors initially. The number of directors may be either increased or diminished from time to time by the By-laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME
ANITA TARVAINEN
ADDRESS
896 NO. FEDERAL HWY., # 528
CITY STATE ZIP
LANTANA FLORIDA 33462

NAME
ADDRESS

CITY STATE ZIP

NAME

ADDRESS

CITY STATE ZIP

ARTICLE VII * INCORPORATORS

The name and address of the Incorporators signing these Articles of Incorporation are as follows:

NAME _____
ANITA TARVAINEN
ADDRESS _____
896 NO. FEDERAL HWY., # 528

CITY _____ STATE _____ ZIP _____
LANTANA FL 33462

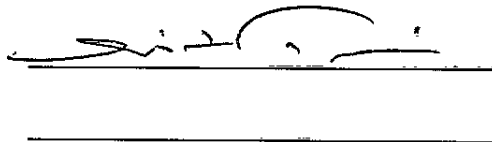
NAME _____
ADDRESS _____

CITY _____ STATE _____ ZIP _____

NAME _____
ADDRESS _____

CITY _____ STATE _____ ZIP _____

in witness whereof, THE UNDERSIGNED SUBSCRIBER(S) HAVE
EXECUTED THESE ARTICLES OF INCORPORATION THIS 20th
DAY OF NOVEMBER, 2001.



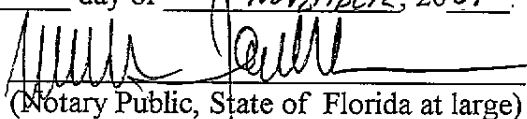
STATE OF FLORIDA) SS
COUNTY OF PALM BEACH)

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared

ANITA TARVAINEN

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that SHE executed these Articles of Incorporation. IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 20 day of NOVEMBER, 2001.

(Notary Seal)


(Notary Public, State of Florida at large)

HEIKKI I. JAAKKOLA
Notary Public, State of Florida
My Comm. Expires Apr. 4, 2002
No. CC 728938
Bonded Thru Western Surety

FILED

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

CERTIFICATE AND ACKNOWLEDGMENT
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED
AGENT OF

LAKE WORTH FAMILY CARE CENTER, INC.
(NAME OF CORPORATION)

PURSUANT TO FLORIDA STATUTES SECTIONS 48.091 and 607.0501, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of incorporation

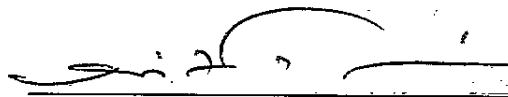
at 1201 SO. FEDERAL HWY., SUITE B

LAKE WORTH, FL. 33460

has named ANITA TARVAINEN
located at the aforesaid address, as its Registered Agent to accept service of process within this statement.

ACKNOWLEDGMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida law in keeping open said office.



(registered agent)

ANITA TARVAINEN