

P02000027528

CT CORPORATION

CORPORATION(S) NAME

Florida True Care, Inc.

2002 MAR 13 PM 12:14
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

RECEIVED
02 MAR 13 AM 11:08
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE FLORIDA

<input checked="" type="checkbox"/> Profit <i>Articles</i>	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	<input type="checkbox"/> Change of RA
	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input type="checkbox"/> CUS
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	<input type="checkbox"/> After 4:30
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

Name _____
Availability _____
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Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

3/13/02

Order#: 5193397

600005099526--9

-03/13/02--01043--011

Ref#: *****70.00 *****70.00

Amount: \$ _____

JS 3/13/02

ARTICLES OF INCORPORATION

OF

FILED

2002 MAR 13 PM 12:14

FLORIDA TRUE CARE, INC.
IN COMPLIANCE WITH CHAPTER 607 AND/OR CHAPTER 621, F.S. (PROFIT)

SECRETARY OF STATE
TALLAHASSEE FLORIDA

FIRST: The name of the corporation is: Florida True Care, Inc.

SECOND: The principal place of business is: 7700 Congress Avenue, Suite 1101,
Boca Raton, Florida, 33487.

THIRD: The purposes for which it is formed is:

To engage in any lawful act or activity for which corporations may be organized under the law provided that the corporation is not formed to engage in any act or activity which requires the consent or approval of any state official, department, board, agency or other body, without such consent or approval first being obtained.

FOURTH: The aggregate number of shares which the corporation shall have authority to issue is 200 without par value.

FIFTH: Initial Officers/Directors are Holly Thomas, 770 Congress Avenue, Suite 1101, Boca Raton, Florida 33487.

SIXTH: The name and Florida street address of the registered agent is: CT Corporation System, 1200 South Pine Island Road, Plantation, Florida 33324.

SEVENTH: The name and address of the Incorporator is: Connie Bryan, 660 East Jefferson Street, Tallahassee, Florida 32301.

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

CT Corporation System

By:

Connie Bryan
Signature/Registered Agent

3/13/02
Date

CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY

Connie Bryan
Signature/Incorporator

3/13/02
Date

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