

# Florida Department of State

Division of Corporations
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Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346 02 MAY -3 AM 10: 3 SECRETARY OF STATE

# FLORIDA PROFIT CORPORATION OR P.A.

CK & A GERIATRIC CARE MANAGEMENT, INC.

Certificate of Status	0
Certified Copy	1.
Page Count	02
Estimated Charge	<b>\$78.</b> 75

### ARTICLES OF INCORPORATION CK & A GERIATRIC CARE MANAGEMENT, INC.

The undersigned subscriber to these Articles of Incorporation, being a natural person, competent to contract, hereby associates himself to form a corporation under the law of the State of Florida. This Corporation shall have perpetual existence.

#### ARTICLE 1 - PURPOSE

The purpose of this Corporation is to engage in the transaction of any and all business permitted under the laws of the United States and of this State.

#### ARTICLE II - CAPITAL STOCK

The maximum number of stock that this Corporation is authorized to have outstanding at any time is ONE THOUSAND (1,000) shares of common stock having no par value.

### ARTICLE III - ADDRESS OF PRINCIPAL OFFICE

The initial principal addrass, mailing addresses and registered office address of this Corporation is the same as follows: 2670 NE 215 Street, Aventura, FL 33180. The initial registered agent at such address is Stephen B. Cohen. 2

## ARTICLE IV - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this Corporation is 2670 NE 215 Street, Aventura, FL 33160 and the name of the initial registered agent of this corporation at that address la: Stephen B. Cohen.

### ARTICLE V - INCORPORATORS

The name and address of the persons signing these articles are: **ADDRESS** NAME

Stephen B. Cohen

:

2670 NE 215 Street Aventura, Florida 33160

## ARTICLE VI - INITIAL BOARD OF DIRECTORS AND OFFICERS

This Corporation shall have one (2) directors and (2) officers initially. The number of directors and officers may be either increased or decreased from time to time by the by-laws, but shall never be less than one (1). The name and address of the initially director and/or officers of this Corporation Is:

**ADDRESS** NAME

Sharon F. Cohen Jack W. Kuhn, Jr.

2670 NE 215 Street, Aventure, FL 33180 2670 NE 215 Street, Aventura, FL 33180

2670 NE 215 Street, Aventura, FL 33180

President Vice President Secretary / Treasurer =

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#### ARTICLE VII - BY-LAWS

The power to adopt, after, amend or repeal the by-laws shall be vested in the Board of Directors.

#### ARTICLE VIII -RESTRICTIONS ON TRANSFER OF STOCK

Shares of capital stock of this corporation shall be issued initially to the following porsons and in the amount set opposite his name:

Sharon F. Cohen Jack W. Kuhn, Jr.

Stephen 8. Cohen

FIFTY (50) SHARES)

ONE HUNDRED (100) SHARES)

FIFTY (50) SHARES) Stephen B. Cohen

## ARTICLE IX - MANAGEMENT OF CORPORATION BY DIRECTORS AND OFFICERS

All corporate powers shall be exercised by or under the authority of the Director and the business affairs of this corporation shall be managed under the direction of the Director of this Corporation.

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#### ARTICLE X -

The shares of the corporation may be issued pursuant to the provisions of Section 1244 of the Internal Revenue Code in order that the shareholders of the corporation may receive the benefits thereunder.

IN WITNESS WHEREOF, the undersigned subscribers have executed these articles of incorporation this Third (3) day of

May 2002.

Stephen B.Cohen / Subscriber

STATE OF FLORIDA

COUNTY OF MIAMI DADE )

SS:

BEFORE ME a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Stephen B. Cohen known to me to be the persons who executed the foregoing Articles of incorporation and they acknowledged before me that they executed these Articles of incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seat in the State and County aforesaid this May 3, 2002

Notary Public, State of Florida

Poloce Witherspoon

Commission # to est 25

Expires 14/21, 21/3

Booked Three

Atlantic Booking Ca., Inc.

ACCEPTANCE BY REGISTERED AGENT

I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation.

Signature

Date

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SECRETARY OF STATE
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