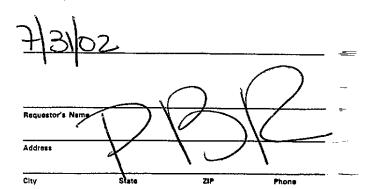
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Acknowledgment

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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** NAME

The name of the corporation shall be:

SENIORS HEALTH CHOICE, INC.

ARTICLE II PRINCIPAL OFFICE

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

4801 SW 168 AVENUE SOUTHWEST RANCHES FL.

ARTICLE III SHARES

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

100 SHARES AT \$100 PAR VALUE

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV The name and address of the initial registered agent is:

KIPS. ERZINGER 4801 SW 168 AVENUE

SOUTHWEST RANCHES, FL.

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):

KIPS. ERZINGER U.P. | DIRECTOR 4801 SW 168 AVENUE SOUTHWEST RANCHES, FL. 33331

ROBERT J. LEUNE, PRES. | DIRECTOR 5448 NW 57 STREET TAMARAC, FL. 33319

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

31 day of July 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: SENIORS HEALTH CHOICE, INC
2.	The name and address of the registered agent and office is: SECTION OF THE PROPERTY SECTION
	(NAME) (NAME) (NAME) (P.O. Box or Mail Drop Box NOT ACCEPTABLE)
	SOUTHWEST RANCHES, FL. 3383)

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.

49 S. Engre 7-31-02 (SIGNATURE) (DATE)