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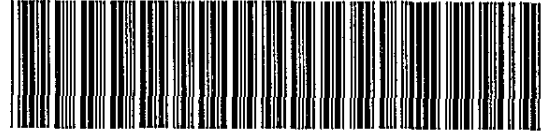
(Business Entity Name)

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PROFESSIONAL ARBOR CARE, INC
180 NW 79 TERRACE, MARGATE, FL 33063
954-984-4120

March 24, 2003

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

SUBJECT: INCORPORATION OF
PROFESSIONAL ARBOR CARE, INC.

Dear Secretary of State:

Enclosed find one original and a copy of the Articles of Corporation of **PROFESSIONAL ARBOR CARE, INC.** and a check for:

<u> X </u> \$70.00	<u> </u> \$78.75	<u> </u> \$122.50	<u> </u> \$131.25
Filing Fee	Filing Fee & Certificate	Filing Fee & Certificate Copy	Filing Fee, Certificate Copy & Certificate

ADDITIONAL COPY REQUIRED

FROM:DAWN RILEY
Name (Printed or typed)

180 NW 79 TERRACE
Address

MARGATE, FL 33063
City, State & Zip

954-984-4120
Daytime Telephone Number

ARTICLES OF INCORPORATION
OF
PROFESSIONAL ARBOR CARE, INC.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be: **PROFESSIONAL ARBOR CARE, INC**

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
180 NW 79 TERRACE, MARGATE, FL 33063

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
one hundred (100) of no par value.

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: **DAWN RILEY at 180 NW 79 TERRACE, MARGATE, FL 33063**

ARTICLE V - INCORPORATOR

The **name and address** of the incorporator of these Articles of Incorporation are:
DAWN RILEY at 180 NW 79 TERRACE, MARGATE, FL 33063

ARTICLE VI - DIRECTORS

The corporation shall have two (2) directors, and the initial directors shall be:
DAWN RILEY at 180 NW 79 TERRACE, MARGATE, FL 33063 and
JOHN McNAUGHT at 180 NW 79 TERRACE, MARGATE, FL 33063


Signature/Incorporator

3/22/03
Date

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.


Signature/Registered Agent

3/22/03
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA