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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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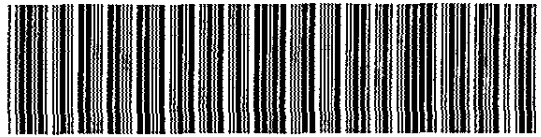
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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## TRANSMITTAL LETTER

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

**SUBJECT:** Cooperative Care LTC, Inc.

**(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)**

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Paul J. Fischer

Name (Printed or typed)

1892 Derbyshire Rd

Address

Maitland, FL 32751

City, State & Zip

407 260-8386

Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**

## **ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

### **ARTICLE I NAME**

The Name of the corporation shall be:

Cooperative Care LTC, INC.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

1892 Derbyshire Rd, Maitland Florida 32751

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

- (a) To transact any and all lawful business for which corporations may be incorporated under the laws of the State of Florida.
- (b) To conduct its business, carry on its operations, and have offices and exercise the powers granted by this act within or without this state.
- (c) To manage and provide management for and supervise all or part of any and every kind of investment, insurance, or business enterprise, and to contract or arrange with any corporation, association, partnership, or individual. To advertise, promote merchandise and contract with respect to furnishing of the same for or on behalf of any person, firm, or corporation, domestic or foreign; to enter into and carry out agency or joint arrangements with other persons, firms, or corporations engaged in like or similar activities; and generally to exploit the services and objects of the Corporation by all lawful means.
- (d) To make distribution for public welfare or for other charitable or educational purposes.
- (e) To be a promoter, incorporator, partner, member, associate or manager of any corporation, partnership, joint venture, trust, or other enterprise.

### **ARTICLE IV SHARES**

The corporation is authorized to issue 100 shares of \$1.00 par value common stock which shall be the aggregate number of shares this corporation has authority to issue.

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TOLSON  
FEDERAL BUREAU OF INVESTIGATION  
U.S. DEPARTMENT OF JUSTICE

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Paul J. Fischer, President	1892 Derbyshire Rd Maitland, FL 32751
James R. Fischer, Vice President	2470 Island Drive Longwood, FL 32779
Carrie L. Fischer, Secretary	1892 Derbyshire Rd Maitland, FL 32751
Madelyn A. Fischer, Treasurer	2470 Island Drive Longwood, FL 32779

**ARTICLE VI REGISTERED AGENT**

The name of the registered agent of this corporation is Paul J. Fischer, whose address is 1892 Derbyshire Road, Maitland, FL 32751

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

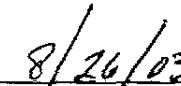
Paul J. Fischer, President	1892 Derbyshire Rd Maitland, FL 32751
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**ARTICLE VII**

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation or any amendment hereto in the manner provided by law and any right conferred upon the shareholders is subject to this reservation. Every amendment shall be approved by the holder or a majority of the stock entitled to vote thereon.

.....  
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.

  
\_\_\_\_\_  
Signature/Registered Agent

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
Date

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CLERK OF DISTRICT COURT  
JULIA M. LEE, CLERK