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CORPORATION NAME(s) & D	OCUMENT NUMI	BER(S) (if known):	
1. SAN MIGUE. (Corporation Name)	L ASSIST	ED LIVING FACILIT	YINC
2. (Corporation Name)		(Document #)	
3. (Corporation Name)		Ph	-
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(Corporation Name) Walk in Pick up time Mail out Will wait	2.80 Photocopy	(Document #) Certified Copy Certificate of Status	:
NEW FILINGS	AMENDMI	ENTS	
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NonProfit	Resignation of R	t.A., Officer/Director	
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Examiner's Initials

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:

SAN MIGUEL ASSISTED LIVING FACILITY INC.

ARTICLE II - PRINCIPAL OFFICE

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

8345 SW 152 St. MIANNI, FLORIDA 33157 (PRINCIPAL)

ARTICLE III -SHARES

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

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ISIDRO MANUEL BORONAT 2994 SW 19 terrace MIAMI, FLORIDA, 33145 03 DCT 14 AM 11: 08
DGCRETARY OF STATE PLORIDA

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

MERCEDES RUBIN 8345 SW 152 St. MIAMI, FLORIDA 33157

The undersigned incorporator has executed these Articles of Incorporation this 13th day of OCTOBER 2003

Mucedes Bulein Signature

ARTICLE VI- DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

MERCEDES RUBIN 8345 SW 1525+. MIAMI, FLOPIDA 33157

ISIDRO MANUEL BORONAT 2994 SW 19 terrace MIAMI, FLORIDA 33145 03 OCT I 4 AM II: 08

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature