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SECARLANY OF STATE
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## TRANSMITTAL LETTER

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

SUBJECT: 7En	BER TOUCH PESIATA	CIC SERVICES,	INC.		
SUBJECT: TENGER TOUCH PESIATRIC SERVICES INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
Enclosed is an origin	al and one(1) copy of the article	s of incompration and a	check for:		
Enclosed is an origina	at and one(1) copy of the article	os or meorporation and t	· chock for ·		
□ \$70.00	IX \$78.75	<b>\$78.75</b>	\$87.50		
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FROM: ROBERT SLOAT Name (Printed or typed)					
Name (Printed or typed)					
12784 VISTA PINE CIRCLE Address					
Address					
·					
FT MUERS FL 339/3					
FT. MyERS, FL 33913  City. State & Zip					
•					
239-482-6002					
	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)

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SECRETARY OF STATE

ARTICLE I NAME

The name of the corporation shall be: Tender Touch Pediatric Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 12784 Vista Pine Circle
Ft. Myers, FL 33913

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The transaction of any and all lawful business for which corporations may be incorporated under the laws of Florida.

ARTICLE IV SHARES

The number of shares of stock is: One Thousand (1,000) at the par value of one dollar (\$1.00) each.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title (s):

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Robert Sloat 12784 Vista Pine Circle Ft. Myers, FL 33913

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Robert Sloat

12784 Vista Pine Circle Ft. Myers, FL 33913

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

03 79 - 01

Date