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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION

ASSISTED LIVING SUITES, INC

Certificate of Status	0
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ARTICLES OF INCORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Assisted Living Suites, Inc

ARTICLE II - PRINCIPAL OFFICE

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

*9405 SW 89 St
Miami, FL 33176*

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:

*Mercedes Cagmano
9405 SW 89 St
Miami, FL 33176*

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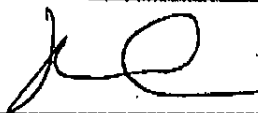
ARTICLE V - INCORPORATOR

THE NAME AND STREET ADDRESS OF THE INCORPORATOR TO THESE
ARTICLES OF INCORPORATION IS:

Mercedes Caamano
9405 SW 89 St
Miami, Fl. 33176

THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE ARTICLES

OF INCORPORATION THIS
9 DAY OF Oct, 2008



SIGNATURE

ARTICLE VI - DIRECTOR(S)

THE NAME(S) AND STREET ADDRESS (ES) OF THE DIRECTOR(S) TO
THESE ARTICLES OF INCORPORATION IS (ARE):

Mercedes Caamano - president
Jeffrey A. Lincoln - vice president
9405 SW 89 St
Miami, Fl 33176

**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