P95000016589 TRANSMITTAL LETTER

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

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	onal Health ((Proposed corpore	Care, Inc. W name - must include s	บไท์x)	
Enclosed is an origina for : \$70.00 Filing Fee	al and one (1) co X \$78.75 Filing Fee & Certificate	py of the articles of \$122.50 Filing Fee & Certified Copy	incorporation a \$131.25 Filing Fee, Certified Copy & Certificate	
FROM:	Name	ol Health Care populated or typed) fice Box 21566 Address	Inc	dB 3/1/75-
	(813)_2	Florida 33 ⁶ 22-1 ity, State & Zip 81-1258 Telephone number	566	FILED 1995 FEB 27 TH 3: 00 SLUMINSSEE, FLURIDA

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

ARTICLES OF INCORPORATION

1995 FEB 27 FN 3: 00 SECTAL ANASSEE FI AND

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: Personal Health Care, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Place of Business: 1510 S Clark Avenue

Tampa, Florida 33629

Mailing Address:

Post Office Box 21566 Tampa, Florida 33622-1566

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 5 , 000 M

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Gerald W. Bobier 1510 S. Clark Avenue Tampa, Florida 33629

ARTICLE V INCORPORATOR(S)

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

Gerald W. Bobier 1510 S. Clark Avenue Tampa, Florida 33629

The undersigned incorporator(s) has(have) executed these Articles of incorporation this

day of Fo	bruary 19 95 .
Bules &	, (
Gerald W. Bobier	Signaturo
· 	Signaturo
	Signatore
	Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is: Personal health Care,	Personal health Care, Inc.		
2.	The name and address of the registered agent and office is: Gerald W. Bobier	TALLAHASSE	IS95 FEB 27	
	(Name)	11	50	
	1510 S. Clark Avenue	FLORIDA		
	(P.O. Box not acceptable)	Ž.	ဒ္ 00	
	Tampa, Florida 33629			
	(City/State/Zip)			

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)

Gerald W. Bobier

February 15, 1995

(Date)