TAMPA ACCOUNTING & TAX SERVICE

6914 E. Fowler Ave - Suite G Tampa, FL 33617 (813) 899 - 0606

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

EFFECTIVE DATE

25 July 9 FH 5: 08

SUBJECT: Golden Age Healthcare, Inc.

Enclosed is an original and one (1) copy of the Articles of Incorporation and

a check for \$ 78,75.

FROM:

Tampa Accounting & Tax Service

6914 E. Fowler Ave - Suite G

Tampa, FL 33617 (813) 899 - 0606

500001510215 -06/09/95--01089--020 *****78.75 *****78.75

Please return all documentation to the undersigned. Thank you.

Tampa Accounting & Tax Service

ARTICLES OF INCORPORATION

EFFECTIVE DATE TEATH SON The undersigned incorporator, being a natural person competent to contract for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopts the following Articles of Incorporation in order to form a corporation under the laws of the State of Florida.

<u>ARTICLE I</u>

The Corporate name is:

Golden Age Health Services, Inc.

ARTICLE JI

This Corporation shall commence upon the execution of these Articles and shall exist perpetually.

ARTICLE III

The corporation may transact any and all lawful business for which corporations may be incorporated under the Florida General Corporations Act.

ARTICLE IV

This Corporation is authorized to issue 10,000 shares of \$ 1.00 par value, common stock. The rights attendant to all such shares, once issued, shall be identical in all respects. The shares of this Corporation are not to be divided into classes. This Corporation is not authorized to issue shares in series or in less than whole shares.

ARTICLE V

Every Shareholder, upon the issuance of any new stock of this Corporation, shall have the right to purchase his or her pro-rata share thereof (as nearly as can be done without issuing fractional shares), at the price at which it is offered to others.

ARTICLE VI

The initial street address and mailing address of the principal place of the Corporation is: 15501 Bruce B. Downs # 208, Tampa, FL 33647. The initial address in Florida of the initial Registered office of this Corporation is: 15501 Bruce B. Downs # 208, Tampa, FL 33647; and the name of the initial registered agent of this Corporation at that address is: Kenneth L. Comeaux.

ARTICLE VII

The business of the corporation shall be managed by a Board of Directors consisting of a minimum of one director and a maximum of seven directors, the number of Directors may be either increased or diminished from time to time by the Shareholders, but shall never be less than one. The initial Board of Directors shall consist of one Director, who shall serve as Director until the first annual meeting of the Shareholders, or until successors have been elected and qualified, and whose name and address is: Kenneth L. Comeaux 15501 Bruce B. Downs # 208, Tampa, Fl. 33647.

ARTICLE VIII

The President shall be Kenneth L. Comeaux.

ARTICLE IX

The Shareholders of this Corporation shall adopt By-Laws which shall contain provisions for the management of the business and the regulation of the affairs of the Corporation that are not inconsistent with the Articles or the laws of the State of Florida.

ARTICLE X

The name and address of the Incorporator is:

Charles Fedak 6914 E. Fowler Ave. Suite G Tampa, FL 33617 (813) 899 - 0606

IN WITNESS WHEREOF; I have subscribed my name this 6th day of June, 1995.

ncorporator

Charle Exedal

CERTIFICATE OF REGISTERED AGENT

PURSUANT TO THE PROVISIONS OF SECTION 607 0501 OR 617 0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The Name of the Corporation is: Golden Age Health Services, Inc.

The name and address of the Registered Agent and Office is:

Kenneth L. Comeaux

15501 Bruce B. Downs # 208, Tampa, FL 33647

Having been named as registered agent and to accept service of process for the above stated Corporation at the place designated in the 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.

DATED: This 6 day of June, 1995.

Registered Agent

| FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 | | APPROVED | |
|--|-------------------------------|--|-------------|
| PROFIT FLORIDA DEPARTMENTO | | AND FILED | |
| ANNUAL REPORT Sucretary of State Division of Corporations | | 1998 OCT 25 PH 12: 14 | |
| 1996 | | SECRETARY OF STATE TALLAHASSEE. FLORIDA | |
| OCUMENT # P9500046230 (5) | | | |
| GOLDEN AGE HEALTH SERVICES, INC. | | | |
| Principal Place of Business Mailing Address | 202 | | |
| Principal Place of Business 15501 BRUCE B. DOWNS. #289 3503 TAMPA FL 33647 TAMPA FL 33647 | | Date Incorporated or Cranified | |
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| 2a. Mailing Address | | 1 <u>(9-22/268/ 1180/</u> | pplicable |
| 2. Principal Place of Business 28 | | 5. Cardificate of Status Desired Fre Requ | uired |
| Suite. Apt #, etc 7003 | 03 | Election Campaign Financing | |
| City & State | | 8. This corporation has liability for intangible tax under s. 153,032, | |
| 23 Zip Country | | Cloud Citated 1 108 1100 | |
| 7/p Country 29 30 | | 10. Name and Address of New Registered Agent | |
| 9. Name and Address of Current Registered Agent | 81 Name / | COMEAUX | |
| Pag Street Add | | Tress (F.O. Box Number is Not Acceptable) | |
| COMMENTY REPORTED 1 /55/ | | THESS (P.O. BOX NUMBER & NOT ACCOUNTS H 3503 | |
| 15501 BRUCE B. DOWNS, 180 3503 | | B5 Zig C | Code |
| TAMPA FL 33647 | | TA-04 FL 3364-7 | |
| the state of the s | above-numed corp | oration submits this statement for the purpose of changing its ruc | igent, I am |
| 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the or registered agent, or both, in the State of Florida Such change was authorized by tamiliar with, and accept the objections of Section 607 0505, Florida Statutes. | | DATE | |
| The comment | paterno Agert segratura resp. | APPLICATION OF CHANGES TO DEFICERS AND DIRECTOR | RS IN 12 |
| Signature transfer parties named or parties of the control of the | 13. | ADDITIONS OF LANGES TO STREET | Addition |
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stalled in Sectio: 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if under certify the certific that it is in the information indicated on the same legal effect as if under certificities are certificated and the certificities are certificated and the certificities are certificated and certif (813)978-0197

Change Addition

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