P96000001272 TRANSMITTAL LETTER

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

EFFECTIVE DATE

SUBJECT: FAMILY KITCHEN MO HOME CARE SERVICES, INC. (Proposed corporate name - must include suffix) 400001679364 -12/28/95--01081--015 ******70.00 *+++*70.00 Enclosed is an original and one (1) copy of the articles of incorporation and a check \$131.25 \$122.50 \$70.00 \$78.75 Filing Fee, Certified Copy Filing Fee Filing Fee Filing Fee & Certified Copy & Certificate & Certificate Additional Copy Required FROM: Name (printed or typed) LITTLE RWER ! Address FLORIDA 32714 City, State & Zip Daytime Telephone number JAN 0 5 1996 SH

NOTE: Please provide the original and <u>one copy</u> of the articles.

ARTICLES OF INCORPORATION

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The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Bistration Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

FAMILY KITCHEN AND HOME CARE SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

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

アストーいマムト:

551 LITTLE RIVER LOOP 1117 ALTAMONTE SPRINGS, FLORIDA 32714

MAILIFF:

P.O. BOX 14 0721

ORLANDO, FLORIDA 32814

ARTICLE III **SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time (1,000) is:

ONE THOUSAND SHARES

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV The name and address of the initial registered agent is:

ROGERL, MCCRACKEN 4 117 ALTIAMONTE SPRINGS, FLURIDA 32714

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

ROGERL. MC CRACKEN # 117 551 LITTLE RWER LUOP # 117 ALTAMONTE SPRINGS, FLORIDA 32714

Effective DATE & JANUARY 1, 1996

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

22 day of DECEMBER, 19 95

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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:	FAMILY KITCHEN AND HOME CARE SERVICESING
2. The name and address of the re	gistered agent and office is:

(NAME)

551 LITTLE RIVER LUOP # 117

(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

ALTAMONTE SPRINGS, FLORIDA 32714

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.

| 12 | 22 | 95 | (SIGNATURE) | (DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314

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