

Seminole Form 215: Trans. Letter (9-92)

ARTICLES OF INCORPORATION

of

THE Caregivers, Inc.
(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent in contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

THE Caregivers, Inc.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue one hundred shares (100) of one Dollar (\$ 1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

NAME	<u>Lisa Farrell</u>		
ADDRESS	<u>11705 N.W. 12th Street</u>		
CITY	<u>Pembroke Pines</u>	FLORIDA	<u>FLA</u>
			ZIP <u>33026</u>

The principal office, if known, or the mailing address of the corporation is:

NAME	<u>Lisa Farrell</u>		
ADDRESS	<u>11705 NW 12th Street</u>		
CITY	<u>Pembroke Pines</u>	FLORIDA	<u>FLA</u>
			ZIP <u>33026</u>

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have two (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	<u>Lisa Farrell</u>		
ADDRESS	<u>11705 NW 12th Street</u>		
CITY	<u>Pembroke Pines</u>	STATE	<u>FLA.</u>
			ZIP <u>33026</u>
NAME	<u>Patrick Farrell</u>		
ADDRESS	<u>11705 NW 12th Street</u>		
CITY	<u>Pembroke Pines</u>	STATE	<u>FLA</u>
			ZIP <u>33026</u>
NAME			
ADDRESS			
CITY		STATE	
			ZIP

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	Lisa Farrell		
ADDRESS	11105 N.W. 12TH Street		
CITY	Pembroke Pines	STATE	Florida ZIP 33026
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 3RD day of January, 1996.

Lisa Farrell (Seal)
 _____ (Seal)
 _____ (Seal)

**CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT**

**CERTIFICATE OF REGISTERED AGENT
OF**

FILED
96 JAN -9 PM 5:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TLC Caregivers, Inc.
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with
its registered office as indicated in the Articles of Incorporation

at 11705 N.W. 12th Street
Pembroke Pines, Florida 33026

has named Lisa Farrell

located at the aforesaid address, as its Registered Agent to accept service of process
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above
stated corporation at the place designated in this certificate, and being familiar with
the obligations of that position, I hereby accept to act in this capacity, and agree to
comply with the provisions of Florida Law in keeping open said office.

Lisa Farrell
(registered agent)