P96000031439

TRANSMITTAL LETTER

SUBJECT: The Living Will Registry (Florida), Inc.

(Proposed corporate name - must include suffix)

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

Enclosed is an original and one (1) copy of the articles of incorporation and a check for: \$70.00 \$78.75 \$122,50 \$131.25 Filing Fee & Certificate Filing Fee Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate Additional Copy Required Anthony Hignett FROM: Name (printed or typed) 1250 Vesper Dr Address Ft Myers FL 33901 City, State & Zip 941-275-0724 Daytime Telephone number

APR 1 0 1995)

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

ARTICLES OF INCORPORATION

96 APR-5 PN 4:41

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:

THE L'VING WILL REGISTRY (FLORIDA), INC

ARTICLE II PRINCIPAL OFFICE

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

1250 Vesper Dr. Ft Myers FL 33901

ARTICLE III SHARES

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

10,000

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

Anthony Hignett 1250 Vesper Dr Ft Myers FL 33901

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):

Anthony Hignott 1250 Vesper Dr Ft Myers FL 33901

The un	dersigned	incorporator(s) h	aschave) executed these Articles of Incorporation this
25	day of	March	, 19 <u>96</u> .
(An add	ditional arti	cle must be adde	ed if an effective date is requested.)
		A+(Zh.H.
			Signature
	,		Signature
		<u> </u>	Signature

Notarization is not required

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 corporati	onis: The Living Will Registry (Florida), Inc
2. The name and address of	the registered agent and office is:
	thony Hignett (NAME)
12	50 Vesper Dr (P.O. Box or Mail Drop Box NOT ACCEPTABLE)
Ft	Myers FL 33901 (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) 25 th March 1996 (DATE)