

P960000 32821

TRANSMITTAL LETTER

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

TELEPHONE 904-224-2000  
FAX 904-224-2001  
904-224-2002

SUBJECT: SENIOR CARE FACILITIES, INC.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

FROM: JEREMIAH L.J. GANEY  
Name (printed or typed)

4206 BEACH PARK DRIVE  
Address

TAMPA, FLORIDA 33609  
City, State & Zip

(813) 289-0032  
Daytime Telephone number

FILED  
96 APR -8 AM 10:21  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

Dmc  
4/16/96

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

**ARTICLES OF INCORPORATION**

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96 APR -8 AM 10:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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:

SENIOR CARE FACILITIES, INC.

**ARTICLE II PRINCIPAL OFFICE**

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

4206 BEACH PARK DRIVE  
TAMPA, FL. 33609

**ARTICLE III SHARES**

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

100 SHARES

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

JEREMIAH L. J. GANEY  
4206 BEACH PARK DRIVE  
TAMPA, FL. 33609

**ARTICLE V INCORPORATOR(S)**

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

JEREMIAH L.J. GANEY  
4206 BEACH PARK DRIVE  
TAMPA, FL. 33609

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

29th day of MARCH, 1996.

  
JEREMIAH L. J. GANEV Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Articles of Incorporation  
Filing Fee - \$35**

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

FILED

96 APR -8 AM 10:21

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 307.0501 or 617.0501, FLORIDA  
STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS  
OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIG-  
NATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF  
FLORIDA,

1. The name of the corporation is: SENIOR CARE FACILITIES, INC.,

2. The name and address of the registered agent and office is:

JEREMIAH L.J. GANEY

(Name)

4206 BEACH PARK DR.

(P.O. Box not acceptable)

TAMPA, FL. 33609

(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 perfor-  
mance of my duties, and I am familiar with and accept the obligations of my position  
as registered agent.*

*Jeremiah L.J. Ganey*  
(Signature)

29 March, 1996  
(Date)