

P96000043865

Transmittal Letter

FEBRUARY 2, 1996

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

Dear Sir:

900001723993  
-02/26/96--01062--001  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Enclosed please find Articles of Incorporation and the Designation and Acceptance of Registered Agent for filing, together with our check in the amount of \$70.00 to cover the filing fee, designation of registered agent, and charter tax.

Clover Davis  
4119 N. State Road 7 Ste 319  
Lauderdale Lakes, FL 33319

954-733-5871

Sincerely,

*Clover Davis*  
CLOVER DAVIS

RECEIVED  
DEPT. OF STATE  
TALLAHASSEE, FLORIDA

FEB 23 AM 6:30

FILED

00192

SN FEB 27 1996

Enclosures

*Clover Davis called  
on May 21.*

*corrected address in  
art. IV, VII and principal add*

*96-A418*



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

February 27, 1996

CLOVER DAVIS  
4119 N. STATE RD. 7, *ste 319*  
LAUDERDALE LAKES, FL 33319

SUBJECT: SUPREME HEALTH CARE INC  
Ref. Number: W9600004418

We have received your document for SUPREME HEALTH CARE INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the street address of each officer/director. If the officer/director does not have a street address, list the mailing address and write (N/A).

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6052.

Sandy Ng  
Document Specialist

Letter Number: 896A00008552

ARTICLES OF INCORPORATION  
OF  
SUPREME HEALTH CARE INC

FILED  
95 MAY 23 AM 8:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of FLORIDA.

ARTICLE I NAME

The name of the corporation shall be  
SUPREME HEALTH CARE INC.

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any and all lawful activities or business permitted under the laws of the United States, the State of FLORIDA, or any other state, county, territory or nation.

ARTICLE III CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 500 shares of common stock having a par value of \$1.00 per share.

ARTICLE IV ADDRESS

The street address of the initial registered office of the corporation shall be 4119 N. State Road 7<sup>th</sup>, Lauderdale Lakes, Florida 33319 and the name of the initial Registered Agent for the corporation at that address is Margaret Jones.

ARTICLE V SPECIAL PROVISIONS

The stock of this corporation is intended to qualify under the requirements of Section 1244 of the Internal Revenue Code and the regulations issued thereunder. Such actions as may be necessary shall be deemed to have been taken by the appropriate officers to accomplish this compliance.

ARTICLE VI TERM OF EXISTENCE

This corporation shall exist perpetually.

## ARTICLE VII      LIMITATION OF LIABILITY

Each director, stockholder and officer, in consideration for his services, shall, in the absence of fraud, be indemnified, whether then in office or not, for the reasonable cost and expenses incurred by him in connection with the defense of, or for advice concerning any claim asserted or proceeding brought against him by reason of his being or having been a director, stockholder or officer of the corporation or of any subsidiary of the corporation, whether or not wholly owned, to the maximum extent permitted by law. The foregoing right of indemnification shall be inclusive of any other rights to which any director, stockholder or officer may be entitled as a matter of law.

## ARTICLE VIII      SELF DEALING

No contract or other transaction between the corporation and other corporations, in the absence of fraud, shall be affected or invalidated by the fact that any one or more of the directors of the corporation is or are interested in a contract or transaction, or are directors or officers of any other corporation, and any director or directors, individually or jointly, may be a party or parties to, or may be interested in such contract, act or transaction, or in any way connected with such person or person's firm or corporation, and each and every person who may become a director of the corporation is hereby relieved from any liability that might otherwise exist from this contracting with the corporation for the benefit of himself or any firm, association or corporation in which he may be in any way interested. Any director of the corporation may vote upon any transaction with the corporation without regard to the fact that he is also a director of such subsidiary or corporation.

This corporation shall have a minimum of one director. The initial Board of Directors shall consist of:

Clover Davis      -      President

Margaret Jones      -      Vice President

Both at: 4750 NW 19<sup>th</sup> Ct.  
Lauderhill, FL 33313

ARTICLE IX INCORPORATOR

The name and address of the incorporator is:

Clover Davis  
4119 N. State Road 7, Ste 319  
Lauderdale, Florida 33319

IN WITNESS WHEREOF, the undersigned has hereunto set his  
hand and seal on this 22 day of February, 1996.

Incorporator:

Clover Davis  
Clover Davis

STATE OF Florida  
COUNTY OF Broward

The foregoing instrument was executed and acknowledged  
before me this 22 day of February, 1996, by Clover Davis.

(SEAL)

Jorge Penafiel  
Notary Public  
State of \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_



JORGE PENAFIEL  
Comm Exp. 4-9-96  
Bonded By Service Ins.  
No. 00142857

DESIGNATION OF AND ACCEPTANCE  
BY REGISTERED AGENT

The following is submitted in compliance with the laws of the State of Florida. Supreme Health Care Inc, a corporation organizing under the laws of the State of Florida, with its principal office located at 4119 N. State Road 7, Lauderdale Lakes, Florida 33319, has named Margaret Jones, whose address is 4119 N. State Road 7, Lauderdale Lakes, Florida 33319, as its Agent to accept service of process within this State.

ACCEPTANCE:

I agree as Registered Agent to accept service of process; to keep the office open during prescribed hours; to post my name (and any other officers of said corporation authorized to accept service of process at the above designated address) in some conspicuous place in the office as required by law.

Registered Agent:

Margaret Jones  
Margaret Jones

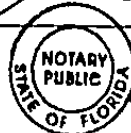
STATE OF Florida  
COUNTY OF Broward

BEFORE ME, the undersigned authority, this day personally appeared Margaret Jones, who, after being duly sworn, deposes and says that the facts and matters contained above are true and correct, and that he has executed the same for the purposes expressed herein.

WITNESS my hand and official seal this 22 day of February, 1996.

(SEAL)

Notary Public  
State of \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_



JORGE PENAFIEL  
My Comm Exp. 4-9-96  
Bonded By Service Ins.  
No. CCJ92862

FILED  
JAN 23 AM 8:30  
CLERK OF STATE  
TALLAHASSEE, FLORIDA