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TRANSMITTAL LETTER

FILED
96 AUG -6 PM 2:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

100-100191-1361
-00/06/96-01/31/01
\$131.25 \$131.25

SUBJECT: TaDesron Individual Support Providers 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: Byron K. Johnson
Name (printed or typed)

119 Dodge Road
Address

Pensacola, Florida 32503
City, State & Zip

904-857-4477
Daytime Telephone number

Mail
out

RECEIVED
FLORIDA SECRETARY OF STATE
96 AUG -6 PM 2:47

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

D. BROWN AUG - 6 1996

ARTICLES OF INCORPORATION

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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:

JaDesron Individual Support Providers Inc.

ARTICLE II PRINCIPAL OFFICE

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

119 Dodge Road / P.O. Box 2271
Pensacola, Florida 32503 / Pensacola, FL 32513

ARTICLE III SHARES

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

1700.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Byron K. Johnson
119 Dodge Road
Pensacola, Florida 32503

ARTICLE V INCORPORATOR(S)

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

Byron K. Johnson
119 Dodge Road
Pensacola, FL 32503

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

6 day of August, 1996.

Byron K Johnson
Signature

Signature

Signature

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

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0601 or 617.0601, 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: Jr Desron Individual Support Providers Inc.

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

Byron K. Johnson
(Name)
119 Dodge Road
(P.O. Box not acceptable)
Pensacola, Florida 32503
(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.

Byron K. Johnson
(Signature)

8/6/96
(Date)