

DEC-27-1996

HARRIS

DEL

13-9-2-88

P.01/09

916 000103610

12/26/96

FLORIDA DIVISION OF CORPORATIONS
PUBLIC ACCESS SYSTEM
ELECTRONIC FILING COVER SHEET

9:41 AM

((H96000017996 5))

TO: DIVISION OF CORPORATIONS

FAX #: (904)922-4001

FROM: HARRIS, BARRETT, MANN & DEW
CONTACT: OUIDA FOX
PHONE: (813)892-3100

ACCT#: 072728000016

FAX #: (813)892-0227

NAME: PERSONALIZED CARE MANAGEMENT, INC.

AUDIT NUMBER.....H96000017996

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..0

PAGES..... 6

CERT. COPIES.....1

DEL.METHOD.. FAX

EST.CHARGE.. \$122.50

NOTE: PLEASE PRINT THIS PAGE AND USE IT AS A COVER SHEET. TYPE THE FAX
AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

** ENTER 'M' FOR MENU. **

ENTER SELECTION AND <CR>:

Menu: <Ctrl R-Shift>

2400 7E1

ANSI

Online

DEC 27 1996

12/27/96

12/27/96

W416-27011

12/27/96

DEC-27-1996 08:03

HARRIS BARRETT MANN & DEW

813 894 2158 P.09/09



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

December 26, 1996

HARRIS, BARRETT, MANN & DEW

SUBJECT: PERSONALIZED CARE MANAGEMENT, INC.
REF: W96000027011

We received your electronically transmitted document. However, the document has not been filed and needs the following corrections:

The required electronic filing cover sheet was not submitted with the document. Please resubmit the document with the electronic filing cover sheet.

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) 487-6915.

Pamala Hall
Document Specialist

FAX Aud. #: B96000017996
Letter Number: 496A00057267

DEC-27-1996 08:02

HARRIS BARRETT MANN & DEW

813 894 2158 P.03/09

FAX AUDIT NO H96000017996

ARTICLES OF INCORPORATION
OF
PERSONALIZED CARE MANAGEMENT, INC.

FILED
DEC 27 AM 9:14
TALLAHASSEE, FLORIDA

THE UNDERSIGNED HEREBY MAKE, SUBSCRIBE, ACKNOWLEDGE AND FILE
THIS CERTIFICATE FOR THE PURPOSE OF BECOMING A CORPORATION UNDER
THE LAWS OF THE STATE OF FLORIDA.

ARTICLE I

NAME

The name of this corporation is PERSONALIZED CARE MANAGEMENT,
INC.

ARTICLE II

PURPOSE

This corporation may engage in any activity or business
permitted under the laws of the United States and of the State of
Florida.

ARTICLE III

CAPITAL STOCK

The maximum number of shares of stock that this corporation is
authorized to have outstanding at any time is One Thousand (1,000)
shares of common stock of One and NO/100 (\$1.00) Dollars per share
par value.

THIS INSTRUMENT WAS PREPARED BY:
JOHN C. LAVERY ESQUIRE
HARRIS, BARRETT, MANN & DEW
P.O. DRAWER 1441
ST. PETERSBURG, FL 33731-1441
(813) 892-3100
FBN: 0318914

FAX AUDIT NO. H96000017996

FAX AUDIT NO H96000017996

ARTICLE IVDURATION

This corporation is to exist perpetually.

ARTICLE VPRINCIPAL OFFICE AND REGISTERED AGENT

The principal office of the corporation shall be located at 4369 14th Way N.E., St. Petersburg, Pinellas County, Florida 33703.

The name and street address of the initial registered agent of the corporation in the State of Florida is: Mary Ann Quartetti. The Board of Directors may, from time to time, appoint a substitute registered agent and move the registered office or the principal office, or both, to any other address in the State of Florida.

ARTICLE VIINITIAL BOARD OF DIRECTORS

This corporation shall have one (1) or more director(s) as provided by the By-Laws. Initially, this corporation shall have one (1) director(s), the names of whom are as follows:

NAMEADDRESS

Mary Ann Quartetti

4369 - 14th Way N.E.
St. Petersburg, FL 33707

ARTICLE VII

OFFICERS

The names and addresses of the officers of this corporation are as follows:

<u>NAME AND OFFICE</u>	<u>ADDRESS</u>
Mary Ann Quartetti President	4369 - 14th Way N.E. St. Petersburg, FL 33707
Elizabeth Visger Vice President/Secretary Treasurer	4369 - 14th Way N.E. St. Petersburg, FL 33707

ARTICLE VIII

COMMENCEMENT OF CORPORATE EXISTENCE

The existence of this corporation shall commence upon filing with the Secretary of State's office.

ARTICLE IX

INDEMNIFICATION

The corporation shall indemnify all directors and officers, whether or not then in office, who are or become a party, or are threatened to be made a party, to any threatened, pending or completed action, suit or proceedings, whether civil, criminal, administrative or investigative by reason of the fact that such person is or was a director or officer, or is or was serving at the request of the corporation as an officer or director against expenses (including attorneys' fees, including hourly charges for paralegals and other staff members operating under the supervision of an attorney, whether at trial or appeal), judgments, fines and

amounts paid in settlement actually and reasonably incurred by such person in connection with such action, suit or proceeding, including any appeal thereof; provided, however, that there shall be no indemnification against gross negligence or willful misconduct.

ARTICLE X

BY-LAWS

The initial By-Laws shall be adopted by the Board of Directors. The power to alter, amend or repeal the By-Laws or adopt new By-Laws is vested in the Board of Directors, subject to repeal or change by action of the shareholders.

ARTICLE XI

AMENDMENT

The right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, is reserved to the Board of Directors and the Shareholders as specified under the laws of Florida.

ARTICLE XII

INITIAL CAPITAL

The amount of capital with which this corporation shall begin business shall not be less than One Hundred and NO/100 (\$100.00) Dollars.

DEC-27-1996 08:03

HARRIS BARRETT MANN & DEW

813 894 2158 P.07/09

FAX AUDIT NO H96000017996

ARTICLE XIII

INCORPORATORS

The names and addresses of the incorporators of this corporation are:

NAME

ADDRESS

Mary Ann Quartetti

4369 14th Way N.E.
St. Petersburg, FL 33703

IN WITNESS WHEREOF, these Articles of Incorporation have been signed, as Incorporator, by: MARY ANN QUARTETTI.

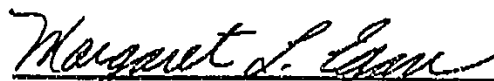
Dated this 26th day of December, 1996.


MARY ANN QUARTETTI

STATE OF FLORIDA

COUNTY OF PINELLAS

The foregoing instrument was acknowledged before me this 26th day of December, 1996, by MARY ANN QUARTETTI, who is personally known to me or who has produced _____ as identification.


Printed Name:
Notary Public
My Commission Expires:
Serial Number:

25PCM.ART



Margaret L. Egan
MY COMMISSION # CC601303 EXPIRES
January 31, 2000
BONDED THROUGH TROY FARM INSURANCE, LLC.

**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR
DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE,
NAMING AGENT UPON WHOM PROCESS MAY BE SERVED**

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said Act:

First -- That PERSONALIZED CARE MANAGEMENT, INC., desiring to organize under the laws of the State of Florida with its principal place of business in Pinellas County, Florida, has named Mary Ann Quartetti, located at 4369 - 14th Way, N.E., St. Petersburg, as its agent to accept service of process within this state.

ACKNOWLEDGMENT

Having been named to accept service of process for the above stated corporation, at place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.



Registered Agent

25PCM.RA

FILED
96 DEC 27 AM 9:31
TALLAHASSEE
FLORIDA