P9700009754

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

\$70.00

Filing Fee

300002069673--5 -01/28/97--01041--002 ******70,00 ******70,00

\$131.25

Filing Fee, Certified Copy

& Certificate

(Proposed corporate name - must include suffix)

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

SUBJECT: AMERICAN SENIOR CARE SERVICES. INC

\$78.75

Filing Fee

(954) 968-0339

& Certificate

FROM: AMERICAN SENIOR CARE SERVICES. INC.

Name (printed or typed)

1291A SOUTH POWERLINE RD. SUITE 252

Address

POMPANO BEACH, FL. 33069

City, State & Zip

\$122.50

Filing Fee

& Certified Copy

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

Daytime Telephone number

ARTICLES OF INCORPORATIONS

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 | NAME

The name of the corporation shall be:

AMERICAN SENIOR CARE SERVICES, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 1291A SOUTH POWERLINE RD. SUITE 252

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ROBERT D. THRONEBERRY 1291A SOUTH POWERLINE RD SUITE 252 POMPANO BEACH, FL. 33069

ARTICLE V INCORPORATOR(S)

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

ROBERT D. THRONEBERRY 101 BRINY AVE., APT. 2904 POMPANO BEACH, FL. 33062

PATRICK M. BOYLE 1291A S. POWERLINE RD., SUITE 258 POMPANO BEACH, FL. 33069

SANDRA Y. CONGER 1931 N.E. 51st STREET, APT. 23 FT. LAUDERDALE, FL. 33308

DONNA J. PRESCOTT 2110 N.W.48th AVE. COCONUT CREEK, FL. 33063

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

John day of June 1997.

January 1997.

January 1997.

Signature

Signature

Signature

Signature

Signature

Articles of Incorporation

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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 corporation is: AMERICAN SENIOR CARE SERVI	CES,	INC	
•				_
2.	The name and address of the registered agent and office is:	SEC	97	
	ROBERT D. THRONEBERRY	_≥	JAN	
	(Name)	i HASSEI	N 27	FILE
	1291A SOUTH POWERLINE RD. SUITE 252		>-	
	(P.O. Box not acceptable)	LORID!	AH II: O)
	POMPANO BEACH, FL. 33069		7	
	(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) (Date)