WILLIAM E. RAIKES III

(407) 595 - 6654 FAX (407) 465 - 0593

HISTORIC COBB CORNER 100 AVENUE A. SUITE C FORT PIERCE, FLORIDA 34950

bruary 26/1997

Department of State Division of Corporations 409 East Gaines Street P. O. Box 6327 Tallahassee, FL 32314

Tallahassee, FL 32314

Tallahassee, FL 32314

C03/03/97--01039--007

*****122.50 ****122.50

Dear Sir or Madam:

Enclosed please find original and one copy of the Articles of Incorporation for the above-referenced corporation. Also enclosed is our check in the sum of \$122.50. Please return a certified copy of the Articles of Incorporation to this office. A self-addressed stamped envelope is enclosed for your convenience.

Thank you for your assistance in this matter.

Very truly yours,

William E. Raikes, III

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ARTICLES OF INCORPORATION

OF

BARBARA JEAN, INC.

ARTICLE I

NAME

The name of this corporation is BARBARA JEAN, INC.

ARTICLE II

NATURE OF BUSINESS

The nature of business to be transacted by the corporation shall be: to own and operate an assisted living facility and any other business which may be lawfully carried out by a Florida corporation.

ARTICLE III

CAPITAL STOCK

This Corporation shall have one (1) class of common stock having a par value of One Dollar (\$1.00) per share and the same shall be fully paid and non-assessable. The maximum number of shares of said stock this Corporation is authorized to have outstanding at any one time is Seven Thousand (7,000.00) shares.

ARTICLE IV

INITIAL CAPITAL

The amount of capital with which this Corporation shall begin business is Five

Hundred (\$500.00) Dollars.

ARTICLE V

TERM OF EXISTENCE

This corporation shall have perpetual existence.

ARTICLE VI

ADDRESS

The initial street address of the principal office of this Corporation in the State of Florida is: 452 S.E. Seabreeze Lane, Port St. Lucie, FL 34983. The Board of Directors may from time to time move the principal office to any other address in the State of Florida.

ARTICLE VII

DIRECTORS

This Corporation shall initially have two (2) Directors. The number of Directors may be increased or diminished from time to time by the By-Laws adopted by the stockholder, but shall never be less than one (1).

ARTICLE VIII

INITIAL DIRECTORS

The names and address of the initial Directors are:

NAME	<u>ADDRESS</u>
BARBARA J. SEIFERT	452 S.E. Seabreeze Lane Port St. Lucie, FL 34983
DANNY L. DALHOVER	452 S.E. Seabreeze Lane Port St. Lucie, FL 34983

ARTICLE IX

SUBSCRIBER

The name and address of the Subscriber of these Articles of Incorporation is as follows:

<u>NAME</u>

ADDRESS

BARBARA J. SEIFERT

452 S.E. Seabreeze Lane Port St. Lucie, FL 34983

ARTICLE X

REGISTERED RESIDENT AGENT AND REGISTERED OFFICE

The name and address of the Registered Resident Agent and her Registered Office to accept service of process within the State for this Corporation is:

NAME

ADDRESS

BARBARA J. SEIFERT

452 S.E. Seabreeze Lane Port St. Lucie, FL 34983

ARTICLE XI AMENDMENTS

These Articles of Incorporation may be amended in the manner provided by law. Each amendment shall be approved by the Board of Directors, proposed by them to the Stockholders and approved at a Stockholders meeting by a majority of the Stockholders entitled to vote thereon; provided, however, amendments may also be made to these Articles of Incorporation upon all of the Directors and Stockholders signing a written statement manifesting their intention that a certain amendment of these Articles of Incorporation be

made.

IN WITNESS WHEREOF, the undersigned subscribing Incorporator and Subscriber, a natural person competent to contract, hereunto set her hand and seal this 25th day of FEBRUARY, 1997.

BARBARA J. SEIFERT, Subscriber

STATE OF FLORIDA COUNTY OF ST. LUCIE

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County aforesaid to take acknowledgments, personally appeared BARBARA J. SEIFERT, to me personally known to be the person described as Subscriber in (or who was identified to me by the following identification: personally known to be the person described as Subscriber in (or who was identified to me by the following identification: personally known to be the person described as Subscriber in (or who was identified to me by the following identification: personally known to be the person described as Subscriber in (or who was identified to me by the following identification: personally appeared had been acknowledged before me that she executed and subscribed to these Articles of Incorporation.

Witness my hand and official seal in the County and State named above this 25th day of february, 1997.

Notary Public, State of Florida

My Commission expires:

TAMMEY M. PINKSTON Notary Public, State of Forida My Comm Expires May 31 1998 No CC 376631 Bonded Thin Official Natury Decision

ACKNOWLEDGMENT OF REGISTERED RESIDENT AGENT

Having been named Registered Resident Agent to accept service of process for BARBARA JEAN, INC. at the place designated in this certificate, I hereby accept the designation as Registered Resident Agent and agree to comply with all of the provisions of Chapter 48, Florida Statutes, as amended.

BARBARA J. SRIFERT
Registered Resident Agent

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