

P97000025770

TRANSMITTAL LETTER

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

100002108711--8  
-03/10/97--01114--013  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: ADULT DAY CARE FACILITY

Proposed Corporate Name

A DAY AWAY ADULT DAY CARE I/A/C.

Enclosed is an original and one copy of the Articles of Incorporation, a designation of registered agent, and a check for \$70.00. Please return one copy of the Articles stamped with the filing date.

FROM:

CATHY LONG

Name (print or type)

6644 S.E. 89th Street

Address

Ocala, Fl. 34472

City, State, Zip

(352) 245-5241

Area Code and Phone Number (Daytime)

TALLAHASSEE, FLORIDA

97 MAR 21 PM 3:58

FILED

W97-5986

SM MAR 14 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

March 14, 1997

CATHY LONG  
6644 SE 89TH ST.  
OCALA, FL 34472

SUBJECT: A DAY AWAY ADULT DAY CARE INC.  
Ref. Number: W97000005986

We have received your document for A DAY AWAY ADULT DAY 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):

The document must include original signatures.

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: 797A00013049

FILED  
97 MAR 21 PM 3:58  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION  
OF**

A DAY AWAY ADULT DAY CARE INC.

(Name of Corporation)

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

**ARTICLE 1: NAME**

The name of the corporation shall be: A DAY AWAY ADULT DAY CARE INC.

**ARTICLE 2: PRINCIPAL PLACE OF BUSINESS**

The principal place of business of this corporation shall be (give street address and zip code): 6644 S.E. 89th Street, Ocala, FL. 34472

**ARTICLE 3: SHARES**

All stock issued by this Corporation shall be common voting stock of a single class. The number of shares of stock that this corporation is authorized to have outstanding at any time is: 50

**ARTICLE 4: INITIAL REGISTERED AGENT AND REGISTERED OFFICE**

The name of the initial registered agent is CATHY LONG

whose registered office is located at the place of business stated in Article 2 above.

**ARTICLE 5: INCORPORATORS**

The names and street addresses of the incorporators to these Articles of Incorporation are: CATHY LONG 6644 S.E. 89th ST. OCALA, FL. 34472

The undersigned incorporators have executed these Articles of Incorporation this

4th Day of MARCH, 1997.

Signature

Signature

Signature

Signature

Articles of Incorporation  
Filing Fee — \$35.00

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to Florida law, 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/professional association is: A Day Away Adult  
Day Care

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

CATHY LONG R.N.  
Full name

6644 S.E. 89th St  
Address (P.O. Box *not* acceptable)

Ocala Fl. 34472  
City, State, and 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.

Cathy Long Cathy Long  
SIGNATURE OF REGISTERED AGENT

MARCH 4, 1997  
DATE

Designation of Registered Agent  
Filing Fee — \$35.00

FILED  
MAR 21 PM 3:58  
TALLAHASSEE, FLORIDA