# HEATHER L. DOUDNA

Attorney at Law 2536 Countryside Blvd. • Sixth Floor

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March 17, 1997

Department of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

AMERICAN PIONEER SENIOR HEALTH DIVISION, INC.

Dear Sir/Madam:

Enclosed please find an original and one (1) copy of the Articles of Incorporation for the above corporation, together with a check in the amount of \$122.50; such sum representing the fee for filing (\$35.00), designation of registered agent (\$35.00) and a certified copy of the Articles of Incorporation (\$52.50).

Thank you for your anticipated cooperation.

Very truly yours,

Doudna

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Enclosure(s)

### ARTICLES OF INCORPORATION

FOR

## AMERICAN PIONEER SENIOR HEALTH DIVISION, INC.

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

#### ARTICLE I

#### Namo

The name of the corporation is AMERICAN PIONEER SENIOR HEALTH DIVISION, INC. The principal address is:

2536 Countryside Blvd. Clearwater, FL 34623

#### ARTICLE II

#### Duration

The duration of the corporation is perpetual.

#### ARTICLE III

#### Purpose

The general purposes for which the corporation is organized are the following:

- A. To engage in and transact any lawful business for which corporations may be incorporated under the Florida General Corporation Act. No other purpose limits this general purpose in any way.
- B. To do such other things as are incidental to the purposes of the corporation or necessary or desirable in order to accomplish them.

#### ARTICLE IV

### Capital Stock

The aggregate number of shares which the corporation is authorized to issue is TEN THOUSAND (10,000) shares of common stock. Such shares will be of a single class and shall have a par value of ONE DOLLAR (\$1.00) per share.

### ARTICLE V

### Initial Registered Office and Agent'

The street address of the initial registered, office of the corporation is 2536 Countryside Blvd., Sixth Flocr, Clearwater, Florida, 34623, and the name of its initial registered agent at that address is HEATHER L. DOUDNA.

### ARTICLE VI

### Initial Board of Directors

The number of directors constituting the initial Board of directors is one. The number of directors may be increased or decreased from time to time in accordance with the by-laws, but shall never be less than one. The name and address of the initial director(s) of the corporation are/is as follows:

GARY R. BOESCH 2536 Countryside Blvd. Sixth Floor Clearwater, Florida 34623

### ARTICLE VII

#### Incorporator

The name and address of the incorporator is as follows:

HEATHER L. DOUDNA 2536 Countryside Boulevard Sixth Floor Clearwater, Florida 34623

IN WITNESS WHEREOF, the undersigned has signed these Articles of Incorporation on this 1900 day of March, 1997.

HEATHER L. DOUDNA

Incorporator

STATE OF FLORIDA

COUNTY OF PINELLAS )

The foregoing instrument was acknowledged before me this 1774 day of March, 1997, by HEATHER L. DOUDNA, who is personally known to me and who did take an oath.

NOTARY PUBLIC:
sign futley of Adkins
print shirley of Adkins
State of Florida at Large (Seal)
My Commission Expires:

OFFICIAL NOTARY SEAL
SHIRLEY J ADKINS
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC277452
MY COMMISSION EXP. MAY 1,1997

### CERTIFICATE OF DESIGNATION

### REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, 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 PIONEER SENIOR HEALTH DIVISION, INC.

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

HEATHER L. DOUDNA 2536 Countryside Blvd., Sixth Floor Clearwater, Florida 34623

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.

HEATHER L. DOUDNA

DATE: 1101117,1997

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