P9-		CALLETTER	14	
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Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314				
SUBJECT: <u>El</u>	JerServe - I (Proposed corr	-7) -7) 	fix)	
		10	0002128951 -03/31/9701146- ******78.75 *****	: !_ 005 ⊯78,75
Enclosed is an original ar	id one(1) copy of the artic	cles of incorporation and a c	check for :	
\$70.00 Filing Fee	S78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
from: <u>Pat</u>	tricia K. S. Name (Prin	Sovonics ned or typed)		,
106	125 21 mert	ton Rd.	97 A.12	
Lc	argo, FL City, Si	3327 / tate & Zip		
615.611.502 W97 7640	87 <u>3-559-0</u> Daytime Tele	<u>915</u> cphone number		5
	Please provide the ori	HOS Lo ginal and one copy of the	cence # 22718	5-110



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97 APP 15 11 9:43

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 2, 1997

PATRICIA K. SOVONICK 10225 ULMERTON ROAD LARGO, FL 33771

SUBJECT: ELDERSERVE, INC. Ref. Number: W97000007640

We have received your document for ELDERSERVE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

The registered agent must sign accepting the designation.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

If you have any questions concerning the filing of your document, please call (904) 487-6973.

Claretha Golden Document Specialist

Letter Number: 597A00016579

FILED SECRETARY OF STATE OFVISION OF CORPORATIONS

97 APR 15 11 9:43

ARTICLES OF INCORPORATION

ElderServe, Inc. of the Suncoast

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

Article I Name

The name of the corporation shall be ElderServe, Inc. of the Suneoast.

Article II Principal Office

The principal place of business and mailing address of this corporation shall be:

ElderServe, Inc. of the Suncoal. 10225 Ulmerton Road, Suite 7C Largo, FL 33771

Article III Shares

The number of shares that this corporation is authorized to have outstanding at any one time is ten thousand (10,000); such shares shall be of one class, that class being common; there shall be no more than thirty-five (35) shareholders of record at any one time.

Article IV Initial Registered Agent and Street Address

The name and address of the initial registered agent is:

Patricia K. Sovonick 10225 Ulmerton Road, Suite 7C Largo, FL 33771

Article V Incorporators

The names and addresses of the incorporators to these Articles of Incorporation are:

Patricia K. Sovonick 1818 Alberta Drive Clearwater, FL 34616 - 1716 Michael E. Bevis 780 Golfview Drive Roselle, IL 60172 - 1405

Article VI Purpose

The purpose of this Corporation is the transaction of any or all lawful purposes for which corporations may be incorporated under the Florida Business Corporation Act.

The undersigned incorporators have executed these Articles of Incorporation this 24th day of March, 1997.

Patricia K. Sovonick Michael E. Bevis

CERTIFIED RESOLUTION OF THE BOARD OF DIRECTORS ElderServe, Inc. of the Suncoast

I. Michael E. Beyis, do hereby certify that I am the duly elected and qualified Secretary of ElderServe, Inc. A corporation organized under the laws of the State of Florida, and that the following is a true and correct copy of certain resolutions duly adopted at a meeting of the Board of Directors thereof, convened and held in accordance with law, the Articles of Incorporation, and bylaws of the corporation. The meeting took place on the 23rd day of March, 1997. The resolutions are in force and are included in the records of the corporation.

It is resolved that Pinellas Community Bank, Largo, (hereinafter referred to as the "bank") will be a financial institution of the corporation, and that an account will be opened in the of, for and on behalf of the corporation. The name that the accounts will be opened in will be the same as the corporation name shown above.

It is further resolved that delivery to the bank of funds, checks, drafts, or other property, with or without endorsement, will be deposited to the credit of the corporation, and such credits may be withdrawn by check, draft, or other instrument, executed for the corporation by any one of the following individuals.

Patricia K. Sovonick, Treasurer

Michael E. Bevis, Secretary

Michael E. Bevis, Secretary

March 23, 1997

CERTIFICATE OF DESIGNATION OF 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 Elder Serve, Inc. of the Suncocat

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

Patricia K. Sovonick (NAME) 1 اتب 1 کا دنا تا 1 (P. O. Box or Mail Drop Box NOT ACCEPTABLE) Lango, FL 33721 ((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.

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314