0067945 J-M-C Clerical Services 2895 West Sunrise Bivd. Ft. Landordale, FL 33311 (305) 791-1701 City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): Ove Retirement, Inc. (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy □ Walk in Pick up time Mail out Photocopy Will wait Certificate of Status AMENDMENTS NEW FILINGS Profit Amendment NonProfit Resignation of R.A., Officer/ Director Limited Liability Change of Registered Agent Dissolution/Withdrawal Domestication Other Merger OTHER FILINGS REGISTRATION/ **OUALIFICATION** LUG 6 1 1 BSB Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other

Examiner's Initials

CR2E031(1/95)

FILED

, ARTICLES OF INCORPORATION

97 AUG -4 AM 11: 09

FOR

TOUCH OF LOVE RETIREMENT, INC. TALEARAGSEE, FLORIDA

I. The undersigned incorporator, do hereby make, subscribe, execute, acknowledge and deliver for filing this Certificate of Incorporation for the purpose of organizing a corporation under the Florida General Corporation Act.

ARTICLE I

NAME

The name of this corporation will be: TOUCH OF LOVE RETIREMENT, INC.

ARTICLE II

PURPOSES AND POWERS

The general purposes for which the corporation is initially organized shall be the transaction of any and all lawful business for which corporations may be organized under the Florida General Corporation Act.

ARTICLE III

STOCK

The stock of this corporation will be divided into 1,000 shares of stock, \$1.00 par value. All said stock will be payable in cash, property, labor, or services, at a just valuation to be fixed by the Board of Directors at a meeting called for that purpose.

ARTICLE IV

TERM

This corporation will have perpetual existence.

ARTICLE V

DIRECTORS

The number of directors of this corporation will not be less than one nor more than four.

ARTICLE VI

OFFICERS AND INITIAL DIRECTORS

The name and post office address of the President, Vice President, Secretary, Treasurer (any and all of which offices may be held by the same person) and Directors who will hold office until their successors are either elected, appointed, or have qualified is:

Bobsilyn Greaves, President 10132 Northwest 23rd Street Coral Springs, FL 33065

Nicole Greaves, Secretary 10132 Northwest 23rd Street Coral Springs, FL 33065 Robert McKenzie, Vice Pres. 10132 Northwest 23rd Street Coral Springs, FL 33065

Bobsilyn Greaves, Treasurer 10132 Northwest 23rd Street Coral Springs, FL 33065

ARTICLE VII

INCORPORATOR

The name and post office address of the sole incorporator making, subscribing, signing, executing, acknowledging, and causing to be delivered this Certificate of Incorporation for filing with the Department of State is:

John A. Williams 2895 West Sunrise Boulevard Suite 110 Fort Lauderdale, FL 33311 (954)791-1103

ARTICLE VIII

REGISTERED AGENT

The registered agent and street address of the registered office, place of business, or location for the service of process within this State is as follows:

John A. Williams 2895 W. Sunrise Boulevard Suite 110 Fort Lauderdale, FL 33311 (954)791-1103

ARTICLE IX

AMENDMENT

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the stockholders and approved at a stockholders' meeting by atleast a majority of the stock entitled to vote, unless all of the directors and all of the stock-holders sign a written statement manifesting their intention that a certain amendment of these Articles of Incorporation be made.

IN WITNESS WHEREOF, I have hereunto set my hand and seal and acknowledged the foregoing Certificate of Incorporation to be filed in the office of the Secretary of State, State of Florida, this 27 day of Pulp , 1997.

John Q. 31

John A. Williams

| STATE | OF | FLORIDA | , |
|--------|----|---------|---|
| COUNTY | OF | BROWARD | |

The foregoing instrument was acknowledged before me this 27

day of Ruly

__, 1997, by John A. Williams.

Notary Public, State of Florida

Printed Signature: Verdie M. Williams

My Commission Expires:



VERDIE M WILLIAMS My Commission CC398113 Expires Aug. 10, 1998 Bonded by HAI 800-422-1655 Pursuant to Florida Statue Sec. 48.091, the following is submitted, TOUCH OF LOVE RETIREMENT, INC. desiring to organize (UNDER THE LAWS OF THE STATE OF FLORIDA), with its principal office at 2895 West Sunrise Boulevard, in the City of Fort Lauderdale, County of Broward, State of Florida, has named John A. Williams, 2895 West Sunrise Boulevard, Suite 110, Fort Lauderdale, FL 33311; as its agent to accept service or process within this State.

Having been named to accept service of process for the abovestated corporation, at the place designed in these Articles of Incorporation. I hereby accept this appointment, agree to serve in this capacity and to comply with Florida Statue Sec. 48.091, relative to keeping open said principal office.

> John A. Williams Registered Agent

a. Willia