

P97000094583
TRANSMITTAL LETTER

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

SUBJECT: GERIATRIC Resources of Williston, Florida, Inc.
(Proposed corporate name - must include suffix)

300002336253--3
-11/03/97-01090-014
② *****70.00 *****70.00

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Claudia Russell
Name (Printed or typed)

P.O. Box 27
Address

Tupelo, MS 38802
City, State & Zip

601-844-1630
Daytime Telephone number

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 NOV -3 PM 4:32

NOTE: Please provide the original and one copy of the articles.

11-4-97
WS

FILED
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
97 NOV -3 PM 1:32

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

GERIATRIC RESOURCES OF WILLISTON, FLORIDA, INC.

ARTICLE II PRINCIPAL OFFICE

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

1200 South PINE Island Road
Plantation, FL 33324

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

5,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

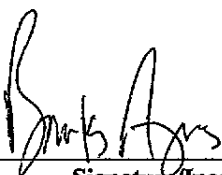
The name and Florida street address of the initial registered agent are:

CT Corporation System
1200 South Pine Island Rd.
Plantation, FL 33324

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Brooks Ayers
5195 Water Ridge Drive
Tupelo, MS 38801



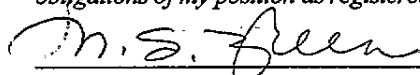
Signature/Incorporator

10/20/97

Date

(An additional article must be added if an effective date is requested.)

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



Signature/Registered Agent

October 23, 1997

Date

M.S. GREEN,
Asst. Secy