P 98 0 RAMMINAL DETTER 303/

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

SUBJECT:	he Nightingale Ga	cup Tro- rate name - must include suf	ffix)	
		. 10	00 002425: -02/09/980 ****131.25	2 11 5 1082002 ****131.25
Enclosed is an original	and one(1) copy of the article	s of incorporation and a	check for :	_
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	2 \$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM: _	Fort Landerdale City,	ourt Address	DIVISION OF CORPORATIONS FALLAHASSEE, FLORIDA	98 FEB -9 AH 10: 06
-	<u>(954) 728-9316</u> Daytime T	Selephone number		

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

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

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NAME

The name of the corporation shall be:

The Nightingale Group, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
621 5.W. 21st Terrace
Ft. Lauderdale, Ft. 33312

SHARES

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

(one hundred thousand)

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Earl Nightingale Jr., 805 Coontie Court, Fort Laudendale, FL 33312

INCORPORATOR

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

Earl Nightingale Jr. 805 Coontie Court, Fort Landerdale, FL. 33312

(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/Regi