

**CAPITAL CONNECTION, INC.**

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

**P98000018685**

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

98 FEB 26 AM 10:25

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\*\*\*\*\*70.00 \*\*\*\*\*70.00

*Mortuary Care facility, Inc.*

- ☒ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
- ☐ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☐ Annual Report / Reinstatement
- ☐ Cert. Copy
- ☒ Photo Copy
- ☐ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval
- ☐ Courier

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Signature \_\_\_\_\_

Requested by: *DN/CBB*

Name \_\_\_\_\_

Date \_\_\_\_\_

Time *8:30*  
*10:45*

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

RP  
02-26-98

**ARTICLES OF INCORPORATION**

**OF**

**MORTUARY CARE FACILITY, INC**

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**ARTICLE I. CORPORATE NAME.**

The name of this corporation is MORTUARY CARE FACILITY, INC.

**ARTICLE II. PRINCIPAL OFFICE.**

The principal place of business and mailing address of this corporation are 107 NE 1 St Avenue, Dania, Florida 33004-0000.

**ARTICLE III. CAPITAL STOCK.**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000,000.

**ARTICLE IV. INITIAL REGISTERED AGENT AND OFFICE.**

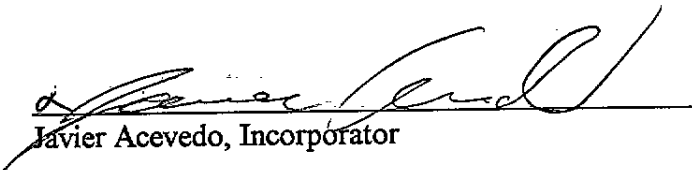
The name and address of the initial registered agent are Javier Acevedo, 3430 N. Miami Avenue, Miami, Florida 33324-0000.

**ARTICLE V. INCORPORATORS.**

The name and street address of the incorporator to these articles of incorporation is:

Javier Acevedo  
107 NE 1 St Avenue  
Dania, Florida 33004-0000

The undersigned executed these articles of incorporation on February 20, 1998.

  
Javier Acevedo, Incorporator

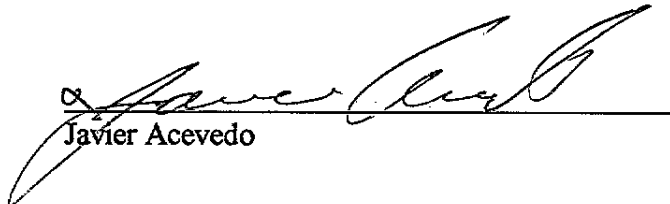
**Designation and Acceptance of Registered Agent  
for a Florida Corporation**

Pursuant to the provisions of F.S. 607.0501, 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 MORTUARY CARE FACILITY, INC.
2. The name of the registered agent is Javier Acevedo.
3. The address of the registered agent/registered office is 3430 N. Miami Avenue, Miami, Florida 33324-0000.

**Acceptance**

Having been named as registered agent and designated to accept service of process for the above corporation, 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.

  
Javier Acevedo

Date: February 20, 1998.

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