

P 98000022861
TRANSMITTAL LETTER

FILED

98 MAR -9 AM 11:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDADepartment of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314SUBJECT: LOVEN-Care Health Clinic
(Proposed corporate name - must include suffix)

500002450875--1

-03/09/98--01094--010
*****18.75 *****78.75

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: Regina Oyekoya
Name (Printed or typed)1493 Tampa PK Plz
AddressTampa, FL 33605
City, State & Zip(813) 226-2273
Daytime Telephone numberP. Hall
MAR 11 1998

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

ARTICLES OF INCORPORATION
OF
LOVE N CARE HEALTH CLINIC, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA

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

ARTICLE I

The name of the corporation is Love N Care Health Clinic, Inc.

ARTICLE II

The principal place of business and mailing address of Love N Care Health Clinic, Inc. is 1493 Tampa Park Plaza, Tampa Florida. However, the Board of Directors may from time to time, move the principal office and/or establish additional branch offices.

ARTICLE III

Love N Care Health Clinic, Inc., is formed for the purpose of engaging in any lawful activity for which a corporation may be formed according to law in the State of Florida.

ARTICLE IV

The duration of Love N Care Health Clinic, Inc. is perpetual, unless sooner dissolved according to law.

ARTICLE V

The aggregate number of shares which Love N Care Health Clinic, Inc. shall have authority to issue shall consist of one hundred thousand common shares. The par value of the shares is \$1.00 each. Transfer of shares of Love N Care Health Clinic, Inc., shall be made only on the stock transfer books of the corporation by a holder of record thereof, or by legal representative furnishing proper evidence of authority to transfer, or by attorney authorized by a power of attorney duly executed and filed with the Secretary of the corporation.

ARTICLE VI

The name and address of the directors of Love N Care Health Clinic, Inc. are as follows:
Mrs. Regina M. Oyekoya; President & Director, 1493 Tampa Park Plaza, Tampa Florida 33605.

Mr Gregory Cousin; Vice President, Secretary, Treasurer & Director; 1493 Tampa Park Plaza, Tampa Florida 33605

ARTICLE VII

The name and address of the incorporators are as follows;
Mr Gregory Cousin; 1493 Tampa Park Plaza, Tampa FL 33605 and Mrs. Regina M. Oyekoya; 1493 Tampa Park Plaza, Tampa FL 33605

ARTICLE VIII

The initial registered agent of Love N Care Health Clinic, Inc., is Mrs. Regina M. Oyekoya; 1493 Tampa Park Plaza, Tampa FL 33605.

Love N Care Health Clinic, Inc., Articles of Incorporation, continued

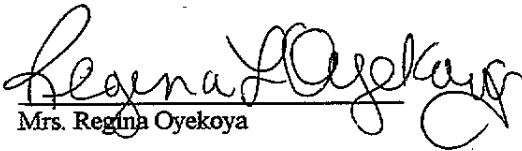
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ARTICLE VIII, continued

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

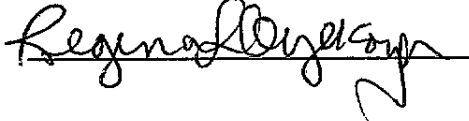
As named registered agent for Love N Care Health Clinic, Inc., I hereby accept service of process at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


Mrs. Regina Oyekoya

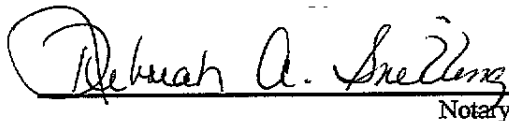
3/6/98
Date

THUS DONE AND PASSED in my office in on this day
1998, in my presence of the undersigned witnesses who signed their names with me, Notary, after due
reading of the whole.

INCORPORATORS SIGNATURE






Notary

DEBORAH A. SNELLING
Notary Public - State of Florida
My Commission Expires Jul 28, 2000
Commission # CC 543439

3/6/98