P980000 4529544/98

To Whom it May Concern,

Please accept the following information to apply for a Florida corporation. I am applying for my assisted living facility license and need my corporate documents back ASAP to send to the State Office. Please Call me at 561-792-4565 or 561-640-7828 if you have any guestions.

Thank you,

PROVED
SECRETARION AM 9: 16

Date 5/13/98

98 MAY 18 AM 9: 16.

Secretary of State Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314			➣
•	Excellent House	ar en	Tues
	. (n:	ame of corporation)	Inc.
		·	
Gentlemen:	•		
Enclosed please find to check in the amount	he original and one cop of \$ 122.50.	by of Articles of Incorporation, together wit	h my
This represents the cos for Registered Agent	t of the Filing Fees, Ce Designation for the a	rtified Copy of Articles of Incorporation and bove named corporation.	l Fee
		Very truly yours,	
		Claudotte Excelle (individual's name)	ut
• •		Excellent House Inc. (name of corporation)	
		MAILING ADDRESS OF CORPORATION —	
		424 Superior Place	
		West Palm Beach,F1. 33409	
	ينابع هم	PLICALE	

(⁵⁶¹

Area Code

) 640-7828

Number

Ext.

ARTICLES OF INCORPORATION

οf

	Ez	xcellent H			 			_
		(na	me of corpo	ration)				
	dersigned subscriber(s) to thation under the laws of the			natural person	(s) competent	to contract,		
							15 SS	
		-		RATE NAME			53 五	
The na	me of the corporation is:	Excellent 424 Super	ior Plac	ce	-		# 7	-
		West Palm	Beach,	71. 33409			SECRETARY TO	-
		4 25 000 12	ore ir br	m amont			mg 3	=
mit.			CLE II - DU	-	. 1		* FS	.e
This co	orporation shall exist perpe	•		-	a law.		哥哥	5
		ARTI	CLE III - P	URPOSE			·*	
	rporation is organized for the States and the State of Fi		gaging in any	ectivities or by	ousiness permi	tted under i	the laws of th	ie
		ARTICLE	IV - CAPI	TAL STOCK				
The co	rporation is authorized to is	sue one hu	ndred	shares (100) of	one do	llar	
	(s) (\$ 1.00) par value Co						_
		- -			-			
	ARTICL	E V - INITIAL	REGISTER	ED OFFICE A	4ND AGENT	•		
The na	me and street address of t	the Initial Regis	tered Agent	of this Corpo	ration is:			
МЕ	Claudette Excel	lent			ī .			
DRESS	3632 Miramontes	Circle						
Υ	Wellington		FLORIDA	<u> </u>		ZIP 334	14	
increase	AR rporation shall havetwo ed or diminished from time ses of the initial director(s)	to time by the	2) dir	ectors initially. ut shall never	The number	of directors one (1). T	s may be eith he names ar	er ıd
NAME	Claudette Excel	lent			,			
ADDRESS	3632 Miramontes	Circle		-	••			
TTY	Wellington		STATE	Florida		ZIP 334	14	···-
NAME	Rockfeller Exce	llent						
ADDRESS	3632 Miramontes	Circle		45				
CITY	Wellington		STATE I	Florida		zip 334	14	
NAME								
ADDRESS					-			
TITY			STATE			ZIP		

ARTICLE VII - INCORPORATORS

The names and addresses of the person(s) signing these Articles of Incorporation are as follows:

	•		
NAME	Claudette Excellent		
ADDRESS	3632 Miramontes Circle		
CITY	Wellington	_{STATE} Florida	ZIP 33414
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS	<u>-</u>		
CITY	_	STATE	ZIP
IN WITNE	SS WHEREOF, the undersigned subscri	per(s) have executed these Artic	les of Incorporation this 13th
day of M			-
		Claudette	Excollent (Seal)
,			(Seal)
			(Seal)

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE	OF REGISTERED	AGENT

OF

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.034, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with

its registered office as indicated in the Articles of Incorporation

at 3632 Miramontes Circle

Wellington, Fl. 33414

has named Claudette Excellent

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)

SECRETARY OF STATE

FILE