5614 Killarney Avenue Fort Pierce, FL 34951

P98000073483

June 1, 1998

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee FL 32314 700002619507--6 -08/19/98--01007--015 ****122.50 ****122.50

Re: Ko-Care, Inc.

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with the client's check for \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Yours truly,

Ko-Care, Inc.

3215 S. Lakeview Circle Bldg 12, Apt 205 Ft Pierce FL 34949 561-465-3031 98 AUG 19 PH 3: 30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. SMITH AUG 2 1 1998

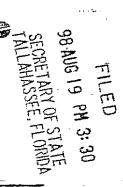
ARTICLES OF INCORPORATION

ot .	
Ko-CARE, (name of co.	INC.
(name of co	rporation)
The undersigned acting as the incorporators of a corporation the following articles of incorporation for such corporation:	under the Florida Business Corporation Act, adopt(s)
The name of the corporation is:	SER POLE
	97 <u>3</u>
ARTICLE II - I	DURATION
This corporation shall exist perpetually unless dissolved accounts	ording to Florida law.
ARTICLE III -	PURPOSE
The corporation is organized for the purpose of engaging in a United States and the State of Florida.	any activities or business permitted under the laws of the
The corporation is authorized to issue shares of a Shares of a Shares of a Shares of a Shares of the initial principal office and, if different different street address of the initial principal office and, if different street address of the initial principal office and, if different street address of the initial principal office and, if different street address of the initial principal office and, if different street address of the initial principal office and street str	common stock, par value \$ per share.
STREET ADDRESS 32.5 1	
STREET ADDRESS 3215 S. LAKEVICE BLOG 12, APT 2	WCR
CITY FF PIERCE	FLORIDA ZIP 34949
Mailing address, if different STREET ADDRESS	
CITY	FLORIDA ZIP
APTIOLE VI ANTILL PROCESS	
ARTICLE VI - INITIAL REGISTE The street address of the initial registered office and the	
NAME LAWRENCE E. KOU	
ADDRESS 3215 S. LAKEVIEW CR	BLOG 12 DOT 205
CITY FT BIERCE	FLORIDA ZIP 34949

ARTICL	EVII .	INITIAI	ROARD	OF	DIRRCT	YORG
**************************************		*********				

either increas	ed or diminisl	ned from t	time to time	e by the By	y-Laws.	but sha	irectors initially. Il never be less t	The number of han one (1). The	directors may be names and
addresses of t	the initial dire	ctor(s) of	the corpora	ition are as	follow	s:		(0,100	
NAME	LAWKE	~ c e_	ĿĘ.	Kove	 کـ -				
ADDRESS	32105	٤.	LAK	CVICE	J C	,c	BLDG-12 E 1=C	485	205
CITY	FT	Pier	<c-< td=""><td> = 1</td><td></td><td>STAT</td><td>E /</td><td>ZII</td><td>38989</td></c-<>	= 1		STAT	E /	ZII	38989
NAME									
ADDRESS									
CITY						STAT	E	211	>
NAME			į.						
ADDRESS									7
CITY				· · · · · · · · · · · · · · · · · · ·	****	STAT	E	ZI	P
			AR	TICLE VI	III - IN	CORPO	ORATORS		-
The names an	ad addresses o	f the inco			-		corporation are a	s follows:	
NAME	LAWK	احدد عد	F	Kove	- - -		-	-	
ADDRESS	32,5	1	LAKE	Vire)	Cre		BLOG ,	2 108	- 2-2
CITY	Er	Bick	د هـ			STAT	E 27/	ZIF	34949
NAME									
ADDRESS					P				
CITY				,		STAT	E	ZIF)
NAME		·····	····		-				
ADDRESS		, , , , , , , , , , , , , , , , , , , 					· · · · · · · · · · · · · · · · · · ·		
CITY		·	•		-	STAT	E	ZI	Ρ
The undersig	ened incomo	rator(s) l	lave execu	ited these	Article	e of Inc	corporation this		
	June								
•								- ·	=
					× Ja	wen	a E Kon		(Signature)
ı					*************				(Signature)
					-				(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE



Ko-CARE, INC.

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office

as indicated in the Articles of Incorporation

at 3215 S. LAKEVICW CK, BLOG 12, APT 205

has named LAWRENCE E. Koves

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

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.

Fluvence E. Coves 6/1/98
(Signature) (Date)