



**ARTICLES OF INCORPORATION**  
**OF**

**NATION SENIOR CARE, INC.**

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**FILED**  
**98 SEP 11 PM 1:27**  
**DIVISION OF CORPORATIONS**  
**TALLAHASSEE, FLORIDA**

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

**ARTICLE I NAME**

The name of the corporation shall be: NATION SENIOR CARE, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

431 N.W. 82 Avenue, # 919  
Miami, FL 33126

**ARTICLE III SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 shares of common stock, \$1.00 par value.

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

Vivian R Bouza  
431 N.W. 82 Avenue, # 919  
Miami, FL 33126

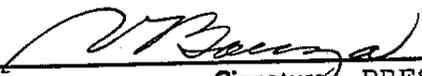
**ARTICLE V INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Vivian R Bouza, PRESIDENT  
431 N.W. 82 Avenue, # 919  
Miami, FL 33126

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

1 day of September, 1998.

  
\_\_\_\_\_  
Signature PRESIDENT

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, 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: NATION SENIOR CARE, INC.

2. The name and address of the registered agent and office is:

Vivian R Bouza  
(Name)  
431 N.W. 82 Avenue, # 919  
(P.O. Box not acceptable)  
Miami, FL 33126  
(City/State/Zip)

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*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) REGISTERED AGENT

\_\_\_\_\_  
September 1, 1998