

MATER D. ALCUBILLA

402 South Lone Oak Drive
Leesburg, Florida 34748
USA

Home Phone 352-323-8879

P98000087055

September 10, 1998

Secretary of State
State of Florida
Department of Corporations
Tallahassee, Florida

100002645191--3
-09/21/98--01134--017
****125.00 ****125.00

Sir:,

Enclosed is a money order in the amount of one hundred twenty five (\$125.00)
dollars for filing fees for the attached corporation.

Thank you.

Sincerely,

Mater D. Alcubilla
Mater D. Alcubilla

FILED
98 OCT 12 AM 9:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W98-21747
SD
10/12



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

September 22, 1998

MATER D. ALCUBILLA
402 SOUTH LONE OAK DR
LEESBURG, FL 34748

SUBJECT: ASSISTED LIVING, INC.
Ref. Number: W98000021747

We have received your document for ASSISTED LIVING, INC. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6924.

Sharon Davis
Document Specialist Supervisor

Letter Number: 598A00047928

ARTICLES OF INCORPORATION

(pursuant to Chap. 89-007)

STATE OF FLORIDA

Secretary of State

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TALLAHASSEE, FLORIDA


1. The name of the corporation shall be ANGEL WINGS OF LAKE COUNTY INC.
2. The number of shares of common stock shall be 7,500, per value \$1.00 per share, all of one class.
3. The purpose of the Corporation is to engage in any lawful act or activity for which corporations may be organized under the laws of the State of Florida.
4. The address of the main business office is 402 South Lone Oak Drive, Leesburg, Florida 34748.
5. The name and address of the Resident Agent is Ms. Mater D. Alcubilla, 402 South Lone Oak Drive, Leesburg, Florida 34748. By my signature below I hereby accept designation as registered agent.


Mater D. Alcubilla

6. The Corporation shall have perpetual life.
7. The governing boards shall be directors, one in number. The name and address of the first director shall be Ms. Mater D. Alcubilla, 402 South Lone Oak Drive, Leesburg, Florida 34748.

The name and address of the incorporator is - Ms. Mater D. Alcubilla, 402 South Lone Oak Drive, Leesburg, Florida 34748.


Mater D. Alcubilla





Janet M. Mastrianno
MY COMMISSION # CC618606 EXPIRES
February 3, 2001
BONDED THRU TROY FAIR INSURANCE, INC.