

P98000091362

TRANSMITTAL LETTER

October 23, 1998

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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-10/26/98--01100--006
*****78.75 *****78.75

SUBJECT: LifeLine Associates, Inc.
(Proposed corporate name - must include suffix)

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: C. Daryl Hollis
Name (Printed or typed)
5650 Aspen Ridge Circle
Address
DeFray beach FL 33484
City, State & Zip
561-495-1867
Daytime Telephone number

FILED
98 Oct 26 PM 12:40
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

C

10/27/98

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

LIFELINE ASSOCIATES, INC.

ARTICLE II PRINCIPAL OFFICE

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

5650 Aspen Ridge Circle
Delray Beach, FL 33484

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000 shares of common stock, par value \$.01 each

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

C. Daryl Hollis
5650 Aspen Ridge Circle
Delray Beach, FL 33484

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

C. Daryl Hollis
5650 Aspen Ridge Circle
Delray Beach, FL 33484



Signature/Incorporator

10/23/98

Date

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

10/23/98

Date

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