P9900013700

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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| Services. | Inc | |
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Date.

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Signature

Name

Requested by:

Walk-In _

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ARTICLES OF INCORPORATION

FILED TO STATE TISTON OF CORPORATIONS

OF

99 FEB 11 PM 2: 25

LIFELINE HEALTHCARE SERVICES, INC.

The undersigned, acting as the Incorporator of a Corporation organized under the laws of the State of Florida, adopt the following Articles of Incorporation:

ARTICLE I - NAME

The name of the Corporation shall be:

LIFELINE HEALTHCARE SERVICES, INC.

The principal place of business of this corporation shall be:

12203 NW 35 St., Coral Springs, FL 33065

ARTICLE II - DURATION

The Corporation shall have perpetual existence.

ARTICLE III - PURPOSE

This Corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, county, territory or nation.

ARTICLE IV - CAPITAL STOCK

The maximum number of shares of stock that this __ Corporation is authorized to have outstanding at any time is FIVE THOUSAND (5000) shares of common stock, each share having a par value of ONE DOLLAR PER SHARE (\$1.00).

Authorized capital stock may be paid for in cash, services or property at a just value to be fixed by the Board of Directors of this Corporation at any regular or special meeting.

ARTICLE V - CAPITAL

The amount of capital with which the corporation will begin business will be not less than FIVE HUNDRED DOLLARS (\$500.00).

ARTICLE VI - INITIAL REGISTERED AGENT AND OFFICE

The street address of the initial registered office of this Corporation shall be:

12203 NW 35 St., Coral Springs, FL 33065

and the name of the initial registered agent of this _____ Corporation at that address is:

Donna Poulsen

ARTICLE VII - INITIAL BOARD OF DIRECTORS AND OFFICERS

This Corporation shall have one Directors and Officer initially. The number of Directors and Officers may be either increased or diminished from time to time by the bylaws, but shall never be less than one. The name and address of the initial Directors and Officers of this Corporation are:

1. Donna Poulsen
 12203 NW 35 St., Coral Springs, FL 33065
 Director / President / Secretary

ARTICLE VIII - INCORPORATORS

The name and street address of the subscriber to these Articles of Incorporation is: $\underline{\underline{}}$

1. Donna Poulsen
12203 NW 35 St., Coral Springs, FL 33065

ARTICLE IX - INDEMNIFICATION

This Corporation shall indemnify any officer or director, or any former officer or director, to full extent permitted by law.

ARTICLE X - AMENDMENT

This Corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREFORE, the undersigned subscriber has executed these Articles of Incorporation, on this day: February 10, 1999

Donna Poulsen

Incorporator

STATE OF FLORIDA)
SS
COUNTY OF BROWARD)

BEFORE ME, a Notary Public authorized to take acknowledgments in and for the State and County set forth above, personally appeared Donna Poulsen known to me to be the person who executed the foregoing Articles of Incorporation, and who acknowledge before me that they executed the same for the purposes set forth therein.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, on this day: February 10, 1999

MOTARY PUBLIC /// State of Florida, at Large

My Commission Expires 😑

Carol M. Dizazzo
MY COMMISSION # CC603396 EXPIRES
November 21, 2000
BONDED THRU TROY FAIN INSURANCE, INC.

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In Pursuance of Chapter 607.325, Florida Statutes, the following is submitted in compliance with said Act:

FIRST: That LIFELINE HEALTHCARE SERVICES, INC. desiring to organize or qualify under the laws of the State of Florida, with its principal offices as indicated in the Articles of Incorporation, at 12203 NW 35 St., Coral Springs, FL 33065, has named Donna Poulsen located at 12203 NW 35 St., Coral Springs, FL 33065 as its agent to accept Service of Process within Florida.

ACKNOWLEDGMENT

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 I further agree to comply with the provisions of said Act relative to keeping open said office.

DATED on this day: February 10, 1999

Donna Poulsen

Registered Agent

ASSURE OF CORPORATION

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