## TRANSMITTAL LETTER

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

SUBJECT:	ELDER L	IFE SERVI	CES INC	• • • • • • • • • • • • • • • • • • •
Enclosed is an origin	nal and one(1) copy of the article	·	800002796 -03/05/99 *****78.75	01106018
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	☐\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM	MARY SUSA Name (Pr	IN FALCON inted or typed)		. 579843
	1901 S. OCEAN	OR #603	<u> </u>	<u>-</u>
	HOLLYWOOD F. City, S 954-923	tate & Zip		38 V.V.S.C.

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

Daytime Telephone number

\*\*\*\*\*78.75

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ARTICLE IV INITIAL REGISTERED AGENT AND STRE	EET ADDRESS
The name and Florida street address of the initial registered agent are:	<u> </u>
MARY SUSAN FALCON 1901 S. OCEAN DR. #603	
1901 S. OCEAN DR. #603	.—4:
HOLLYWOOD, FL. 33019	. <del>"-</del> <del></del>
ARTICLE V INCORPORATOR	. ==
The name and address of the incorporator to these Articles of Incorporati	ion are:
MARY SUSAN FALCON	<u>—</u>
1901 S. OCEAN DR. #603	· —-
MARY SUSAN FALCON 1901 S. OCEAN DR. #603 HOLLY WOOD FL. 33019	· · • = = -
Mary Susan Falcon	3/1/94-
Signature/Incorporator	Date

(An additional article must be added if an effective date is requested.)

Having been named	as registered agent an	d to accent ser	vice of proc	ess for the al	house stated some		7 7 4 4 4
this certificate. I her	eby accept the appoint	ment ac reciete	red comt a	es joi are ca	ove simen corp	oration at the	piace designated in
the provisions of all	statitas valerina to the	men us registe	rea ageni ar	ia agree to a	ct in this capaci	ty. I furthe <u>r</u> a <sub>l</sub>	gree to comply with
me provisions of an	statutes relating to the	e proper and c	omplete perj	formance of t	my duties, and i	l am familiar v	vith and accept the
conganons of my po.	нуон из гедізіегец аде	nt					· <b>x</b> · · · · · -
nan	10 -1	-			-11	<u> </u>	

Signature/Registered Agent

Date