

TRANSMITTAL LETTER

999000063718

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

**SUBJECT:** LONG TERM CARE ASSOCIATES, INC  
(Proposed corporate name - must include suffix)

300002928813--8  
-07/12/99--01106--017  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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 of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Joseph E Sherman  
Name (Printed or typed)  
22530 Third Street #100  
Address  
HAYWARD, CA 94541  
City, State & Zip  
510-581-5474  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 JUL 12 AM 9:27

FILED

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

7/19/99

# 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:

LONG TERM CARE ASSOCIATES, INC

## ARTICLE II PRINCIPAL OFFICE

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

6195 Rock Island Road Bldg 2 Apt 513  
Lauderhill, Florida 33319

## ARTICLE III SHARES

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

One hundred (100)

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Lewis C. Sherman  
11801 Northwest 42nd Street  
Sunrise, Florida 33331

## ARTICLE V INCORPORATOR

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

Joseph E Sherman  
22530 Third Street #100  
Hayward, CA 94541

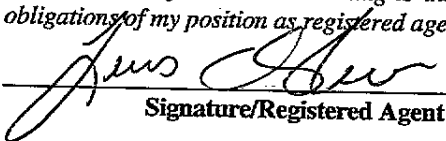
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

  
Signature/Incorporator

6-19-99  
Date

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

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

7.9.99  
Date