Division of Corporations 20070478 Page 1 of 1

## Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations Fax Number : (850)922-4001

From:

Account Name : AL CLARK Account Number: 072100000173 Phone : (727)398-6011 Fax Number : (727)397-5189

## FLORIDA PROFIT CORPORATION OR P.A.

SOUTH EAST SENIOR SERVICES, INC.

Certificate of Status	
Certified Copy	
Page Count	0
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## ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

### ARTICLE I NAME

The name of the corporation shall be

### SOUTH EAST SENIOR SERVICES, INC.

### ARTICLE II PRINCIPAL OFFICE

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

13779 PARK BLVD, N.
SUITE 275
SEMINOLE, FL.33776

SSEE. FLORID

#### ARTICLE III SHARES

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

1000 SHARES NO PAR

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

prepared by:

Name: ROBERT PICCIRILLO

Address: 13779 PARK BLVD. N. SUITE 275

SEMINOLE, FL.33776

Accounting & Tax Help, INC. 8668 PARK BLVD Suite .A SEMINOLE, Florida 33777

PH # 727-560-9682

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## ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Robert Piecirillo 13779 Park Blvd. N. Suite 275 Seminele, FC, 33776

the undersigned incorporator(s) has (have) executed these Articles of Incorporation this
(An additional article must be added if an effective date is requested.)
* Balant Fralls Signature
Signature

### Notarization is not required

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/ REGISTERED AGENT, IN THE STATE OF FLORIDA

1. The name of the corporation is:

### SOUTH EAST SENIOR SERVICES, INC.

2. The name and address of the registered agent and office is:

Accounting & Tax Help, INC.
(Name)

8668 PARK BLVD. Suite A (P.O. Box not acceptable)

SEMINOLE, Florida 33777 (City/State/Zip) 99 AUG -9 PM 5: 22 SECRETARY OF STATE TALEMHASSEE, FLORIDA

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) DATE 8-6-1

PRESIDENT

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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