

Division of Corporations

Page 1 of 2

**P99000110108****Florida Department of State**

Division of Corporations

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Katherine Harris, Secretary of State

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**To:**

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

**From:**

Account Name : BLAXBERG & GRAYSON, P.A.  
Account Number : I19990000119  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**FILED****FLORIDA PROFIT CORPORATION OR P.A.****Assisted Living Management Services, Inc.**

Certificate of Status	1
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**ARTICLES OF INCORPORATION OF  
ASSISTED LIVING MANAGEMENT SERVICES, INC.**

**ARTICLE I.**

**CORPORATE NAME**

The name of this corporation shall be: ASSISTED LIVING MANAGEMENT SERVICES, INC.

**ARTICLE II.**

**NATURE OF CORPORATE BUSINESS**

The Corporation may engage in any activity or business permitted under the laws of the United States and the State of Florida.

**ARTICLE III.**

**CAPITAL STOCK**

This Corporation is authorized to issue a maximum of One Thousand (1,000) shares of common stock having a par value of One Dollars (\$1.00) per share. The consideration to be paid for each share of stock shall be fixed by the Board of Directors.

**ARTICLE IV.**

**INITIAL REGISTERED AGENT AND INITIAL REGISTERED OFFICE**

The Corporation's initial Registered Agent and Registered Office in the State of Florida shall be: DR. ENRIQUE CASUSO, 351 N.W. 42<sup>ND</sup> AVENUE #405, MIAMI, FLORIDA 33126.

**ARTICLE V.**

**MAILING ADDRESS OF CORPORATION**

The Corporation's mailing address shall be:

351 N.W. 42<sup>ND</sup> AVENUE #405, MIAMI, FLORIDA 33126.

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## ARTICLE VI.

## BOARD OF DIRECTORS

The number of Directors may be altered from time to time by By-Laws adopted by the Stockholders. However, the Corporation shall have no less than one (1) Director at any time.

## ARTICLE VII

## INITIAL DIRECTOR

The name and post office address of the first Director of the Corporation is:

NameAddress

Dr. Enrique Casuso

351 NW 42<sup>nd</sup> Avenue #405, Miami, Florida 33126

The first Director shall hold office until the first annual meeting of the Stockholders of the Corporation.

## ARTICLE VIII.

## INCORPORATOR

The name and post office address of the Incorporator executing these Articles of Incorporation is:

IncorporatorAddress

DR. ENRIQUE CASUSO

351 N.W. 42<sup>ND</sup> AVENUE #405  
MIAMI, FLORIDA 33126

THE UNDERSIGNED Incorporator, for the purpose of forming a Corporation to do business within the State of Florida, does make and file these Articles of Incorporation, hereby declaring and certifying that the facts stated are true.

  
Dr. Enrique Casuso

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STATE OF FLORIDA:

: SS

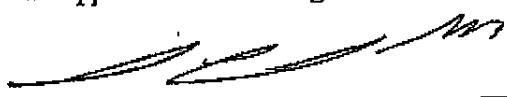
COUNTY OF DADE

BEFORE ME, the undersigned authority, appeared DR. ENRIQUE CASUSO, who is personally known to me or who has produced \_\_\_\_\_ as identification, and acknowledged that he executed said Articles of Incorporation, and who did take an oath.

WITNESS my hand and seal in the State and County aforesaid, this 22nd day of December, 1999.

  
NOTARY PUBLIC, State of Florida  
Print Name: ALEXANDRA SANCHEZ  
COMMISSION # CC 687919  
EXPIRES JUN 28, 2000  
BONDED THRU  
ATLANTIC BONDING CO., INC.  
My Commission Expires: \_\_\_\_\_

The undersigned hereby accepts the foregoing designation as initial Registered Agent and agrees to comply with the provisions of law applicable to said designation.

  
\_\_\_\_\_  
Dr. Enrique Casuso, Registered Agent

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