

N/130000/0262

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

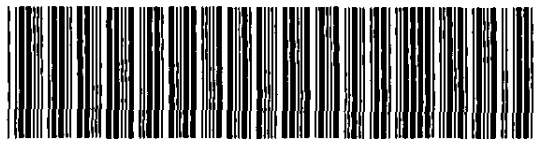
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE
13 NOV 14 PM 2:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
13 NOV 14 PM 2:10

APPROVED
FILED

NOV 14 2013

J. BRYAN

COVER LETTER

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

APPROVED
FILED
13 NOV 14 PM 2:10
STATE OF FLORIDA
TALLAHASSEE

SUBJECT: Council On Senior Housing, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

ADDITIONAL COPY REQUIRED

FROM: M. Dillon Russell
Name (Printed or typed)

4938 S.E. Major Way
Address

Stuart, FL 34997
City, State & Zip

850-668-9000
Daytime Telephone number

dillonrussell@embargo.com
E-mail address: (to be used for future annual report notification)

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

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: Council On Senior Housing, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
4938 S.E. Major Way
Stuart, Fl. 34997

Mailing address, if different is:
same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Secure housing for elderly/senior citizens.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: elected according to the bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: M. Dillon Russell, Pres.
Address: 4938 SE Major Way
Stuart, Fl 34997

Name and Title: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 NOV 14 PM 2:10

APPROVED
FILED

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: M. Dillon Russell

Address: 4938 SE Major Way
Stuart, FL 34997

STATE
TALLAHASSEE, FLORIDA

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: M. Dillon Russell

Address: 4938 SE Major Way
Stuart, FL 34997

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

M Dillon Russell
Required Signature of Registered Agent

Nov 14, 2013
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

M Dillon Russell
Required Signature of Incorporator

Nov 14, 2013
Date