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2021

COVER LETTER

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

SUBJECT: Meagan's Better Care Facility, 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: Dr. Brenda Juste

Name (Printed or typed)

844 NE 205 Terrace

Address

Miami, FL 33179

City, State & Zip

786-486-3405

Daytime Telephone number

drbrendajuste@gmail.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 OF
MEAGAN'S BETTER CARE FACILITY, INC.
A FLORIDA NOT-FOR-PROFIT CORPORATION**

The undersigned, acting as the incorporator of a not for profit corporation under the Florida Not For Profit Corporation Act, as set forth in Chapter 617 of the Florida Statutes, as amended, adopts the following Articles of Incorporation for such Corporation:

ARTICLE I: NAME

The name of the Corporation shall be **MEAGAN'S BETTER CARE FACILITY, INC.** hereinafter referred to as the "Corporation".

ARTICLE II: PRINCIPAL OFFICE AND MAILING ADDRESS

The address of the principal office and the mailing address of the corporation is 844 NE 205 Terrace, Miami, FL 33179

ARTICLE III: DURATION

The period of duration of the Corporation shall be perpetual unless dissolved according to law.

ARTICLE IV: PURPOSES

The organization is organized and operated exclusively for charitable purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986 as now enacted or hereafter amended, including, for such purposes, the making of distributions to organizations that also qualify as Section 501(c)(3) exempt organizations of the Internal Revenue Code of 1986 as now enacted or hereafter amended. To this end, the Corporation shall promote educational, and charitable purposes. Providing residential care to adults 18 years and older.

ARTICLE V: ADDITIONAL PROVISIONS/ EXEMPTION REQUIREMENTS

Resolved that any salaries, wages, together with fringe benefits or other forms of compensation (housing, transportation and other allowances) paid to or provided our employees, directors, or officers will not exceed a value which is reasonable and commensurate with the duties and working hours associated with such employment and with the compensation ordinarily paid persons with similar positions or duties.

This corporation is organized exclusively for one or more of the purposes as specified in Section 501(c)(3) of the Internal Revenue Code, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

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ARTICLE VI: MEMBERSHIP

The corporation should have no members.

ARTICLE VII: MANNER OF ELECTION

The directors are elected as stated in the by laws.

The corporation shall have no voting members. The management and affairs of the corporation shall be at all times under the direction of the president and/or the Board of Directors, whose operations in governing the corporation shall be defined by statutes and by the corporation's by-laws. No Director shall have any right, title, or interest in or to any property of the corporation. The initial Board of Directors/Officers shall consist of the following:

Brenda Juste - President
844 NE 205 Terrace
Miami, FL 33179

George Juste -Vice President
844 NE 205 Terrace
Miami, FL 33179

Sandra Joseph - Secretary
55 NW 51 Street
Miami, FL 33179

Gina Termine – Treasurer
844 NE 205 Terrace
Miami, FL 33179

ARTICLE VIII: INITIAL REGISTERED AGENT AND ADDRESS

The name and Florida street address of the registered agent is:

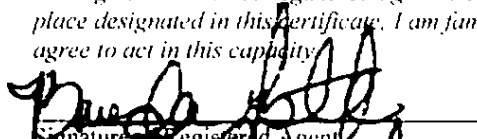
Brenda Juste
844 NE 205 Terrace
Miami, FL 33179

ARTICLE IX: INCORPORATOR

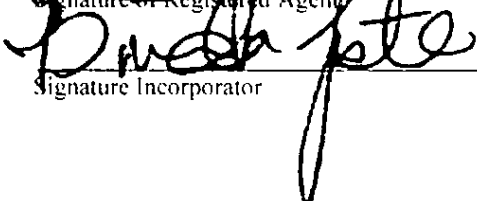
The incorporator of the Corporation is as follows:

Brenda Juste
844 NE 205 Terrace
Miami, FL 33179

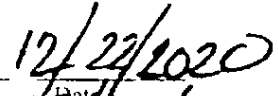
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.



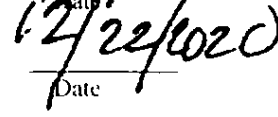
Signature of Registered Agent



Signature Incorporator



Date



Date

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