

PO 3000019098

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

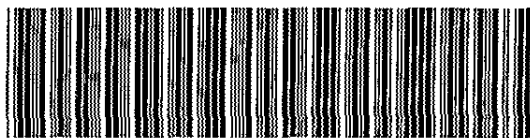
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03 FEB 12 PM 12:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

*Handwritten signature or initials*

**TRANSMITTAL LETTER**

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

**SUBJECT:** Caring Details Inc  
**(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)**

Enclosed are 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:** Cindy Massa  
Name (Printed or typed)

4935 Cambridge Blvd. # 12-203  
Address

Palm Harbor Fl, 34685  
City, State & Zip

727-638-2948  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

Caring Details, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

4935 Cambridge Blvd # 12-203  
Palm Harbor Fl 34685

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

for the transaction of any and all lawful business for which corporations may be incorporated under the state of Florida.

**ARTICLE IV SHARES**

The number of shares of stock is:

1,000 shares at \$.001 par value.

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s):

Cindy Massa- 4935 Cambridge Blvd. # 12-203 Palm Harbor Fl, 34685 President  
Cara Parker- 4935 Cambridge Blvd. # 12-203 Palm Harbor Fl, 34685 Vice President

**ARTICLE VI REGISTERED AGENT**

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

Cara Parker 4935 Cambridge Blvd. 12-203  
Palm Harbor Fl, 34685

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Cindy Massa 4935 Cambridge Blvd. # 12-203  
Palm Harbor Fl, 34685

\*\*\*\*\*  
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

Cara Parker Signature/Registered Agent 2-8-03 Date

Cindy Massa Signature/Incorporator 2-8-03 Date