

P05000037527

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

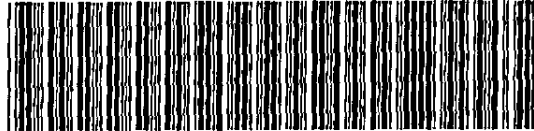
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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ME

TRANSMITTAL LETTER

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

SUBJECT: Delta Healthcare Services, 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: George Dekeles
Name (Printed or typed)

736 Hollywood Blvd.
Address

Hollywood, Florida 33019
City, State & Zip

954-608-7717
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)

ARTICLE I NAME

The name of the corporation shall be:

Delta Healthcare Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

PO BOX 222025
Hollywood, Florida 33022

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation may engage in NURSING MEDICAL SERVICES, as well as, any legal business activity permitted under the laws of the United States and/or the state of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

The maximum number of shares of capital stock that this corporation is authorized to have outstanding at any one time is FIVE HUNDRED (500) shares of common stock having a par value of one (\$1.00) dollar per share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

George Dekeles PO BOX 222025
Hollywood, Florida 33022

ARTICLE VI REGISTERED AGENT

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

George Dekeles 736 Hollywood Blvd.
Hollywood, FL 33019

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

George Dekeles PO BOX 222025
Hollywood, Florida 33022

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/Registered Agent

Signature/Incorporator

Date

Date

**CERTIFICATE DESIGNATING PLACE OF BUSINESS DOMICILE
FOR THE SERVICE OF PROCESS WITHIN THIS STATE NAMING
AGENT UPON WHO PROCESS FEBRUARY IS SERVED.**

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted in compliance with said Act:

First: DELTA HEALTHCARE SERVICES, INC. desiring to Organize under the laws of the State of Florida with its principal officer as stated in Articles of Incorporation, in the City of Hollywood, County of Broward, State of Florida has named GEORGE DEKELES located at 736 Hollywood Blvd., Hollywood, Florida 33019, as its agent to accept service of process within this State.

ACKNOWLEDGEMENT

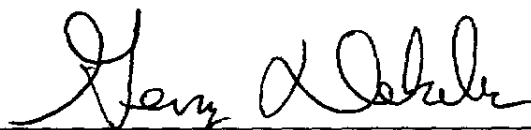
Having been named to accept services of process for the above stated corporation, at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of said act relative to keeping open said office.


GEORGE DEKELES, INCORPORATOR

804-2-0107

4/11/07

IN WITNESS WHEREOF, the undersigned, GEORGE DEKELES, being a natural person competent to contract, have hereunto set their hand and seals this 28th day of February, 2005.

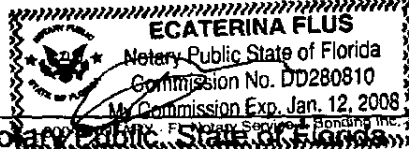


GEORGE DEKELES, INCORPORATOR

STATE OF FLORIDA
COUNTY OF BROWARD

BEFORE ME, the undersigned Notary Public of the State of FLORIDA personally appeared GEORGE DEKELES, known to me to be the individual described in and who executed the foregoing Articles of Incorporation, and acknowledged before me that they executed the same freely and voluntarily for the purpose therein expressed.

WITNESS my hand and official seal this 28th day of February, 2005.


ECATERINA FLUS
Notary Public State of Florida
Commission No. DD280810
My Commission Exp. Jan. 12, 2008
Notary Public, State of Florida
My commission expires: FOL-242-300-69-2960
02-16-07

(Notary Seal)