

P08000094307

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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COVER LETTER

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

SUBJECT: Compassionate Care Hospice of Miami-Dade, 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

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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FROM: Geoffrey D. Smith
Name (Printed or typed)

2873 Remington Green Circle
Address

Tallahassee, FL 32308
City, State & Zip

850-297-2006
Daytime Telephone number

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

Articles of Incorporation

Article 1: Name

The name of the corporation shall be Compassionate Care Hospice of Miami Dade, Inc.

Article 2: Principle Place of Business

18 Aquamarine Ave.
Naples, FL 34114

Article 3: Purpose

Any and all lawful purposes

Article 4: Shares

The number of Shares of Stock shall be 1000

Article 5: Initial Directors/Officers

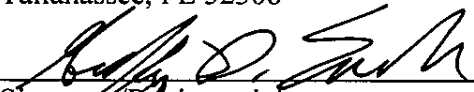
President/Director
Grey, Judith
18 Aquamarine Ave.
Naples, FL 34114

Article 6: Registered Agent

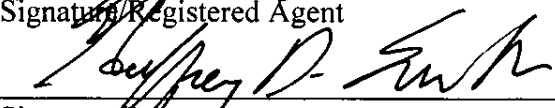
Geoffrey D. Smith
Smith & Associates of Tallahassee, PA
2873 Remington Green Circle
Tallahassee, FL 32308

Article 7: Incorporator

Geoffrey D. Smith
Smith & Associates of Tallahassee, PA
2873 Remington Green Circle
Tallahassee, FL 32308



Signature/Registered Agent



Signature/Incorporator

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Date