

P09000025242

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

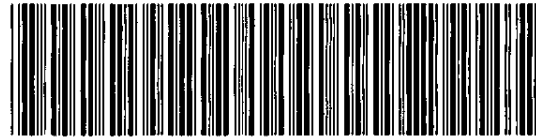
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400145392544

03/18/09--01005--011 **78.75

RECEIVED
09 MAR 18 AM 10:54
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
09 MAR 18 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EP 3/19/09

LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. A PLUS NURSING, INC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in
☐ Mail out

☒ Pick up time 2.00
☐ Will wait

☐ Photocopy

☒ Certified Copy
☐ Certificate of Status

NEW FILINGS

- ☒ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

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:

A PLUS NURSING, INC

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

18911 WENTWORTH DR
HIALEAH FL 33015

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

NURSING SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARE @ 1.00 PER VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

PRESIDENT ALEIDA M NEIRA 18911 WENTWORTH DR HIALEAH FL 33015
SECRETARY JORGE L NEIRA 18911 WENTWORTH DR HIALEAH FL 33015

ARTICLE VI REGISTERED AGENT

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

ALEIDA M NEIRA
18911 WENTWORTH DR
HIALEAH FL 33015

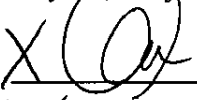
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JORGE L NEIRA
18911 WENTWORTH DR
HIALEAH FL 33015

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TALLAHASSEE, FLORIDA

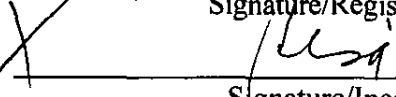
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

X 

Signature/Registered Agent

MARCH 16, 2009

Date

X 

Signature/Incorporator

MARCH 16, 2009

Date