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FAX No. P. 00

Division of Corporations

**P16000004480**

Florida Department of State  
Division of Corporations  
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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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FLORIDA PROFIT/NON PROFIT CORPORATION  
LIFE SKILLS CARE CORP.

Certificate of Status	0
Certified Copy	1
Page Count	02
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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: Life Skills Care Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address:  
1703 North Bay Rd  
apt # A511  
Sunny Isles Beach Fl  
33160.

Mailing address, if different is:  
1703 North Bay Rd # A511  
Sunny Isles Beach Fl  
33160.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Christopher Soares (P)</u>	Name and Title: _____
Address: <u>1703 North Bay Rd</u>	Address: _____
<u># A511</u>	_____
<u>Sunny Isles Beach Fl 33160</u>	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name: Christopher Soares  
Address: 1703 North Bay Rd # A511  
Sunny Isles Beach Fl 33160.

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Christopher Soares  
Address: 1703 North Bay Rd # A511  
Sunny Isles Beach Fl 33160.

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

Required Signature/Registered Agent

01/13/2016  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

01/13/2016  
Date