

# F00000000/502

## TRANSMITTAL LETTER

To: Registration Section  
Division of Corporations

SUBJECT: Family Management Services, Inc.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following: 000003151000--1  
-02/29/00--01021--008

Cheryl A. Alston, CEO

\*\*\*\*\*87.50 \*\*\*\*\*87.50

(Name of Person)

Family Management Services, Inc.

(Firm/Company)

10301 Democracy Lane, Suite 301

(Address)

Fairfax, VA 22030

(City/State/Zip)

Should you need to call someone concerning this matter, please call:

Cheryl A. Alston

at ( 703 ) 352-3013

(Name of Person)

(Area Code & Daytime Telephone Number)

### STREET ADDRESS:

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

AL

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☒ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

March 2, 2000

CHERYL A. ALSTON, CEO  
FAMILY MANAGEMENT SERVICES, INC.  
10301 DEMOCRACY LANE, SUITE 301  
FAIRFAX, VA 22030

SUBJECT: FAMILY MANAGEMENT SERVICES, INC.  
Ref. Number: W00000005731

We have received your document for FAMILY MANAGEMENT SERVICES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6094.

Agnes Lunt  
Document Specialist

Letter Number: 000A00011693

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Family Management Services, Inc.  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Virginia  
(State or country under the law of which it is incorporated)
3. 54-1748345  
(FEI number, if applicable)
4. February 21, 1995  
(Date of incorporation)
5. Perpetual  
(Duration: Year corp. will cease to exist or "perpetual")
6. upon qualification  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. a. 10301 Democracy Lane, Suite 301 Fairfax, VA 22030  
(Principal office address)
- b. 10301 Democracy Lane, Suite 301 Fairfax, VA 22030  
(Current mailing address)
8. To provide care management services to senior adults & disabled adults.  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. **Name and street address of Florida registered agent:** (P.O. Box or Mail Drop Box NOT acceptable)  
Name: Jane P. Wheeler  
Office Address: 407 South Mill View Way, Suite 100  
Ponte Vedra Beach, Florida 32082  
(Zip code)
10. **Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Jane P. Wheeler  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: Cheryl A. Alston

Address: 10610 Fiesta Road  
Fairfax, VA 22032-3711

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

**B. OFFICERS**

President: Cheryl A. Alston

Address: 10610 Fiesta Road  
Fairfax, VA 22032-3711

Vice President:

Address:

Secretary:

Address:

Treasurer:

Address:

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.

*Cheryl A. Alston*  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14.

Cheryl A. Alston, President/CEO

(Typed or printed name and capacity of person signing application)

# Commonwealth of Virginia



## State Corporation Commission

*I Certify the Following from the Records of the Commission:*

FAMILY MANAGEMENT SERVICES, INC. is a corporation existing under and by virtue of the laws of Virginia, and is in good standing.

The date of incorporation is February 21, 1995.

Nothing more is hereby certified.



*Signed and Sealed at Richmond on this Date:*  
*February 14, 2000*

*Joel H. Peck*  
Joel H. Peck, Clerk of the Commission