

F04000005827

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J. BRYAN OF CORPORATIONS
TALLAHASSEE, FLORIDA

W04-34052
J. BRYAN SEP 13 2004

J. BRYAN OCT 12 2004

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Caring Companions, 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:

Russell Piper
(Name of Person)

Caring Companions, Inc
(Firm/Company)

529 COURT ST. SUITE 501
(Address)

Reading, Pa. 19601
(City/State and Zip code)

For further information concerning this matter, please call:

Russell Piper at (610) 374-6522
(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

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

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

September 13, 2004

RUSSELL PIPER
CARINGCOMPANIONS, INC.
529 COURT ST. SUITE 501
READING, PA 19601

SUBJECT: CARING COMPANIONS, INC.
Ref. Number: W04000034052

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for CARING COMPANIONS, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 504A00054445

CARING COMPANIONS, INC

529 Court Street
Suite 501
Reading, Pa. 19601

Phone: (610) 374 - 6522
Fax: (610) 374 - 6577
E-mail: www.caringcompanions1inc@verizon.net

October 5, 2004

Florida Department Of State
Joey Bryan
Document Specialist

Re: Caring Companions, Inc.
ref # w04000034052

Dear Joey,

I am sending along with this letter my certificate of existence sent to me from the Commonwealth of Pennsylvania Department Of State. If you are in need of any further information please let me know. Thank you for your time and attention.

Sincerely,



Russell Piper
Director Of Operations

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2004 OCT 11 PM 2:03
DIV. OF CORPORATIONS
TALLAHASSEE, FLORIDA

**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. Caring Companions, 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. PA. 3. 56-2344988
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 03/24/03 5. Perpetual
(Date of incorporation) (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. 4432 Ewell Road Lakeland, FL 33811
(Principal office address)
- 529 COURT ST. SUITE 501 Reading, Pa. 19601
(Current mailing address)
8. Companion Services, non medical
(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)

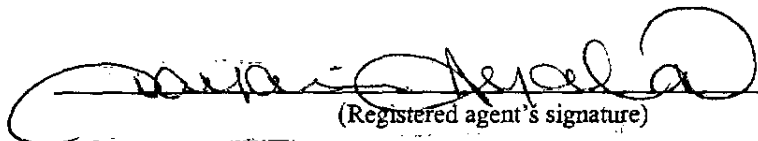
Name: Damaris Ayala

Office Address: 4432 Ewell Rd.

Lakeland, Florida 33811
(City) (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.


(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.

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TALLAHASSEE, FLORIDA
CLERK OF SUPERIOR COURT

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

A. DIRECTORS

Chairman: Hinde Piper error

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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JULIENNE CORPORATION
TALLAHASSEE, FLORIDA

B. OFFICERS

President: Hinde Piper

Address: 2145 QUEENS COURT

Reading, Pa 19606

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. Hinde C. Piper Pres

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Hinde Piper Pres

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

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

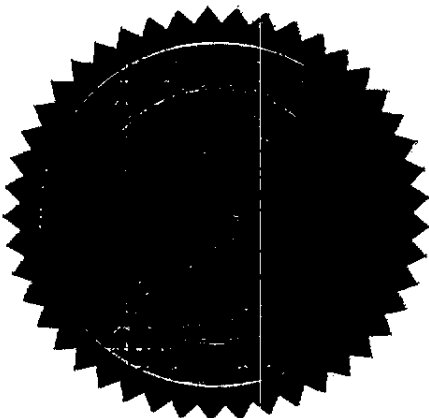
September 28, 2004

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

CARING COMPANIONS, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I
have hereunto set my hand and
caused the Seal of the
Secretary's Office to be affixed,
the day and year above written.

Perth C. Contes

Secretary of the Commonwealth