

TRANSMITTAL LETTER

70000000001973

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

3/27

700003150387--6
-02/28/00--01151--015
*****87.50 *****87.50

SUBJECT: THE CARING HANDS HOME INC.
(Proposed corporate name - must include suffix)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM: DR. W. C. HAMILTON
Name (Printed or typed)
P.O. BOX 1143

Address

LEHIGH ACRES, FL 32970
City, State & Zip

(941) 368-8755
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2000 MAR 27 PM 12:22

FILED

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

AR 3/27

W-6033



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

March 7, 2000

DR. M.C. HAMILTON
P.O. BOX 1143
LEHIGH ACRES, FL 33970

3/27

SUBJECT: THE CARING HANDS HOME INC.
Ref. Number: W00000006033

We have received your document for THE CARING HANDS HOME 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):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Please return the original and one copy of 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) 487-6925.

Angela Revell
Document Specialist

Letter Number: 200A00012516

FILED

2000 MAR 27 PM 12:22

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

THE CARING HANDS HOME INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

*2714 8ST. SW
LEHIGH ACRES, FL 33471*

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is(are):

*IN CARING FOR THOSE THAT ARE MENTALLY
OR PHYSICALLY INCAPACITATED OR RETARDED*

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is:

*THEY ARE OR WILL BE APPOINTED BY THE CHAIRMAN
OF THE BOARD, AS STATED IN THE BYE-LAWS*

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

*DR. M. C. HAMILTON, 1000 LEE BLVD., #203
LEHIGH ACRES, FL 33436*

ARTICLE VI INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation are:

*DR. M. C. HAMILTON / CARMEN CARABALLO
1000 LEE BLVD., SUITE # 203, LEHIGH ACRES, FL 33436
MAILING ADD: P.O. BOX 1143, LEHIGH ACRES, FL 33470*

Signature/Incorporator

Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature/Registered Agent

Date

2-22-2000