N06000007754

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000185708 3)))

H06000185708ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)205-0381

From:
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)220-1440

FILED
2006 JUL 21 PM 2:01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION

TIME 2 CARE, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	$78.75

Electronic Filing Menu Corporate Filing Menu Help

T. Burch JUL 24

FROM :LAZARUS FAX NO. :3052201440 Jul. 20 2006 02:51PM P1

FILED
2006 JUL 21 PM 2:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

FOR

The undersigned, acting as *incorporator(s) of a corporation* pursuant to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

ARTICLE I NAME:

The name of the corporation shall be:

Time 2 Care, Inc.

ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The *principal and mailing* address of this corporation is:

321 nw 51 ST.
mia FL 33127

ARTICLE III PURPOSE (S)

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

A group home for temporary detox rehabilitation facility.

ARTICLE IV MANNER OF ELECTIONS OF DIRECTORS:

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

By the by laws.

ARTICLE V LIMITATION OF CORPORATE POWERS

The corporate powers of this corporation are as provided the section *617.0302, Florida Statutes, unless limited as follows:*

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

fcda TRimino, President
570 nw 42 ST.
Mia. FL 33127

ARTICLE VII DIRECTORS (must have the minimum of three directors): **NAME AND ADDRESS**

director Danmer Reyes 13312 sw 136 terr. Mia FL 33186
director Luis Alduncin 2105 sw 12 Street Mia FL 33135
director Erik Vazquez 570 nw 42 Street - Mia FL 33127
President, fcda Trimino 570 nw 42 Street Mia FL 33127

ARTICLE VIII INCORPORATOR

The name and street address of the incorporator for these Article of Incorporator is:

fcda TRimino, President.
570 nw 42 ST
Mia FL 33127

The undersigned incorporator has executed these Articles of Incorporation this 21 day of July, 2006

signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERERD AGENT, IN THE STATE OF FLORIDA.

The name of the corporation is:

Time 2 Care, Inc.

(must includes suffix)

The name and address of the registered agent and office is:

Ada Trimino, President

(name)

570 nw 42 street

(P.O. Box or Mail Drop Box NOT Acceptable)

Mia FL 33127

(City/State/Zip)

FILED
2006 JUL 21 PM 2:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 appointed 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.

Ada Trimino

Signature of Registered Agent

7/21/06

Date