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SECRETARY OF STATE
FALLAHASSEE, FIRMINA

FEB 22 2010 D. A. WHITE

COVER LETTER

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

SUBJECT:	FUSION SERVI	CES INC	•	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an	original and one (1) copy of the arti	cles of incorporation and	a check for:	
■ \$70.0 Filing Fo	•	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: TARA COOK				
Name (Printed or typed)				
1990 HAMPTON BLVD # 103				
NORTH LAUDERDALE, FL. 33068 City, State & Zip				
	954 548 5373 Daytime To	elephone number		

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

TAHBO @ BELLSOUTH.NET WE-mail address: (to be used for future annual report notification)



RECEIVED

10 FEB 19 PM 3: 00

FLORIDA DEPARTMENT OF STATE

Wision of Coaporations FALLAHASSEE, FLORIDA

February 2, 2010

TARA COOK 7990 HAMPTON BLVD #103 NORTH LAUDERDALE, FL 33068

SUBJECT: FUSION SERVICES INC.

Ref. Number: W1000005262

We have received your document for FUSION SERVICES INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected 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) 245-6933.

Dale White Regulatory Specialist II New Filing Section

Letter Number: 610A00002677

ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

at the state of the
ARTICLE I NAME The name of the corporation shall be:
FUSION NATURAL CARE SERVICES INCED
ARTICLE II PRINCIPAL OFFICE
The principal street address and mailing address, if different is:
7990 HAMPTON BLVD # 103
NORTH LAUDER DALE, FL. 33068 SECRETARY OF STATE ARTICLE III PURPOSE
The purpose for which the corporation is organized is: TO ASSIST THE ELDERLY WITH HONEMAKING
CHORES, SHOPPING.
ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected or appointed:
APPOINTED
ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS List name(s), address(es) and specific title(s):
TARA GOOK - POERIDENT-7990 HAMPTON BLYD#10
TOCCARA WILLIAMS - VICE PRESIDENT - 2051 NW 28
PT. LAUDERDALE, FL.
ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:
TARA COOK 1990 HAMPTON BLVD #103
NORTH LAUDERDALE, FL. 33060
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:
TOCCARA WILLIAMS
2051 NW 28 H AVE CT. LAUDERDALE, FL. 33311
2051 NW 28 TH AVE OT. LAUDERDALE, FL. 33311 *********************************
2051 NW 28 TH AVE T. LAUDERDALE, FL. 33311 ********************************
2051 NW 28 TH AVE T. LAUDERDALE, FL. 33311 ********************************
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