112000002870

| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| | | | | |
| | | | | |

Office Use Only



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COVER LETTER

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

| SUBJECT: A & V Care Group, Inc. | | | | | | | | |
|---|--|-------------------------------------|--|--|--|--|--|--|
| | (PROPOSED CORPORATI | E NAME – <u>MUST INCL</u> | UDE 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 C | OPY REQUIRED | | | | | |
| FROM: Verona Coote-janes Name (Printed or typed) | | | | | | | | |
| 1830 NW 34th Terrace | | | | | | | | |
| Address | | | | | | | | |
| Lauderhill, FL 33311 City, State & Zip | | | | | | | | |
| (954) 279-0693 | | | | | | | | |
| Daytime Telephone number | | | | | | | | |

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

E-mail address: (to be used for future annual report notification)

charliejanes@comcast.net

ARTICLES OF INCORPORATIONIn compliance with Chapter 617, F.S., (Not for Profit)

| ARTI | CLE I | N/A | ME |
|------|-------|-----|----|
| | | | |

A & V Care Group, Inc.

The name of the corporation shall be:

| ARTICLE II | PRINCIPAL OFFICE | | | |
|------------------------------|--|---------------------------------------|--|--|
| , | Principal street address | | Mailing address, i | f different is: |
| | 1830 NW 34th Terrace | | SAME AS PRINCIPLE | |
| | Lauderhill, FL 33311 | | | |
| ARTICLE III | PURPOSE | - | | |
| | which the corporation is organized is: | | | |
| The purpose o | f the corporation is charitable, scientific, Revenue Service Code of 1954 or the co | orresponding provis | ion of any future U.S. In | ternal Revenue |
| law. Among the disadvantaged | nese purposes is to provide a safe and s individuals. | ecure environment | for empowering econom | ically and socially |
| ARTICLE IV | MANNER OF ELECTION The manner | er in which the director | s are elected and appointed: | |
| Directors will | be elected as outlined on page 2, | Article VI, Section | n 1 of the Bylaws. | |
| ARTICLE V | INITIAL OFFICERS AND/OR DIREC | CTORS | | |
| Name and T | Title: Andrea Eldemire, Officer | | :Kelly Watson, Officer | |
| Address: | 1830 NW 34th Terrace | Address: | 1830 NW 34th Terrace | |
| | Lauderhill, FL 33311 | | Lauderhill, FL 33311 | |
| Name and T | itle:Victory Charles, Officer | Name and Title | : AnnMarie Ricketts. Off | icer |
| Address: | 1830 NW 34th Terrace | | 1830 NW 34th Terrace | |
| | Lauderhill, FL 33311 | · · · · · · · · · · · · · · · · · · · | Lauderhill, FL 33311 | |
| Name and T | itle: Verona Coote-janes, Officer | Name and Title | : | |
| Address: | 1830 NW 34th Terrace | Address: | • | |
| | Lauderhill, FL 33311 | | | I N |
| | |) | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| ARTICLE VI | REGISTERED AGENT | | | |
| The <u>name and Fl</u> | orida street address (P.O. Box NOT acceptable | e) of the registered age | nt is: | |
| Name: | Verona Coote-janes | | | ' آب م |
| Address: | 1830 NW 34th Terrace | | | |
| | Lauderhill, FL 33311 | | | ය දිදු දිදු |
| ARTICLE VII | INCORPORATOR | | | |
| The <u>name and ad</u> | dress of the Incorporator is: | | | |
| Name: | AnnMarie Ricketts | · | | |
| Address: | 1830 NW 34th Terrace | | | |
| | Lauderhill, FL 33311 | | | |
| Taving been non | ned as registered agent to accept service of p | racess for the above s | stated cornoration at the pl | ace designated in thic |
| ertificate, I am fa | miliar with and accept the appointment as reg | istered agent and agree | e to act in this capacity | -ce wood, was a mining |
| | | | 2/11/ | , <u> </u> |
| | Required Signature of Registered Age | nt | <u>3/ </u> | te |
| submit this docu | ment and affirm that the facts stated herein a | re true. I am aware th | at any false information sul | mitted in a document |
| | of State constitutes a third degree felony as pr | | | |
| Jun 5/ | de later | | 2 - 11. | -17 |
| TIVI 10 | W I HOLA | *** | 3-11 | 10 |
| Ì | Required Signature of Incorpora | IOF | Di | ne |