

N/300001885

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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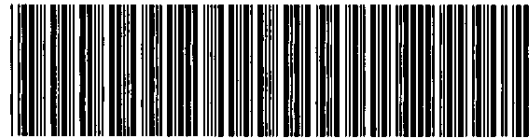
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 FEB 26 PM 1:54



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 23, 2013

RYAN MCKUHEN
182 SE ASHLEY OAKS WAY
STUART, FL 34997

SUBJECT: TITUS II TRANSITIONAL LIVING INC.
Ref. Number: W13000004418

We have received your document for TITUS II TRANSITIONAL LIVING 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):

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 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) 245-6052.

Pamela Smith
Regulatory Specialist II

Letter Number: 913A00001695

RECEIVED
13 FEB 26 PM 10:19
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Titus II Transitional Living 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: Ryan McKuhen
Name (Printed or typed)

182 SE Ashley Oaks Way
Address

Stuart, FL 34997
City, State & Zip

772 607.2900
Daytime Telephone number

T2Living@mail.com
E-mail address: (to be used for future annual report notification)

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

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

ARTICLE I NAME

The name of the corporation shall be: Titus II Transitional Living Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3933 SW Bamberg St
Port St. Lucie, FL
34953

182 SE Ashley Oaks Way
Stuart, FL 34997

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: group home facility

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

The method of election of directors will be stated in the bylaws
OF THIS CORPORATION

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ryan McKuhen - Executive Director Title: _____
Address: 182 SE Ashley Oaks Way Address: _____
Stuart FL 34997

Name and Title: Jennifer McKuhen Name and Title: _____
Address: DIRECTOR Address: _____
182 SE Ashley Oaks Way
STUART FL 34997

Name and Title: Gloria McConnell Name and Title: _____
Address: Manager Address: _____
1965 SW Providence Pl.
Port St. Lucie, FL 34953

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Jennifer McKuhen
Address: 182 SE Ashley Oaks Way
STUART, FL 34997

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ryan McKuhen
Address: 182 SE Ashley Oaks Way
STUART FL 34997

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Jennifer McKuhen
Required Signature of Registered Agent

Jennifer McKuhen

1-16-13

Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

[Signature]
Required Signature of Incorporator

1-16-13

Date

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