

N15000007172

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

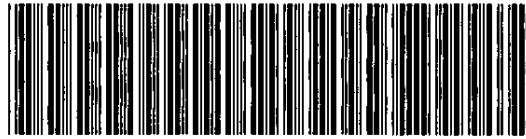
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2015 JUL 20 PM 1:41

RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS

JUL 24 2015
I ALBRITTON

COVER LETTER

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

SUBJECT: Acu-Care 4 Community Service, Incorporated

(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: Otelia DuBose
Name (Printed or typed)

115 Saratoga Blvd.
Address

Royal Palm Beach, FL 33411
City, State & Zip

(561) 798-3678
Daytime Telephone number

oduboser@gmail.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: Acu-Care 4 Community Service, Incorporated

ARTICLE II PRINCIPAL OFFICE

Principal street address:
115 Saratoga Blvd.

Royal Palm Beach, FL 33411

Mailing address, if different is:

P. O. Box 2554

West Palm Beach, FL 33402

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The primary purpose of this corporation shall be to administer and operate educational, cultural, community, health, charitable and technological programs.

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sherman Raing, President

Address: 609 Clear Lake Avenue
West Palm Beach, FL 33401

Name and Title: Deborah Raing, Secretary

Address: P. O. Box 2504
West Palm Beach, FL 33402

Name and Title: David Cotton, Vice President

Address: 451 West 35th Street
Riviera Beach, FL 33404

Name and Title: Janie Peters, Assistant Secretary

Address: 1600 - 44th Street
West Palm Beach, FL 33407

Name and Title: Claudine Cotton, Treasurer

Address: 451 West 35th Street
Riviera Beach, FL 33404

Name and Title: ~~Otelia DuBose, Ph.D., Reg. Agent~~

Address: ~~115 Saratoga Blvd.~~
~~Royal Palm Beach, FL 33411~~

FILED
DIVISION OF CORPORATIONS
JUL 20 PM 1:41
WEST PALM BEACH, FL

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Otelia DuBose, Ph.D., Reg. Agent

Address: 115 Saratoga Blvd.
Royal Palm Beach, FL 33411

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Deborah Raing

Address: P. O. Box 2504
West Palm Beach, FL 33402

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

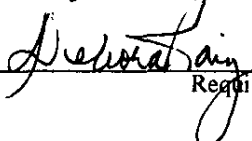
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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


Required Signature of Registered Agent

7-16-15
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.


Required Signature of Incorporator

July 16, 2015
Date

ARTICLES OF INCORPORATION
ACU-CARE 4 COMMUNITY SERVICE, INCORPORATED

ARTICLE I. The name of the corporation **must** include a corporate suffix such as Corporation, Corp., Incorporated, or Inc.

The name of the corporation shall be Acu-Care 4 Community Service, Incorporated.

ARTICLE II. The principal place of business and mailing address of the corporation.

The principal address of the corporation shall be 115 Saratoga Blvd. East, Royal Palm Beach, FL 33411. The mailing address of the corporation shall be Post Office Box 2554, West Palm Beach, FL 33402.

ARTICLE III. The specific purpose or purposes for which the corporation is organized.

The primary purpose of this corporation shall be to administer and operate educational, cultural, community, health, charitable and technological programs.

ARTICLE IV. The manner in which the Directors are elected or appointed.

Directors shall be elected by a majority vote at the Annual Meeting. The management of the affairs of the corporation shall be vested in a Board of Directors, as defined in the corporation's By-Laws. No Director shall have any right, title, or interest in or to any property of the corporation.

ARTICLE V. The names, address and titles of the Directors/Officers.

Sherman Raing, President
609 Clear Lake Avenue
West Palm Beach, FL 33401

David Cotton, Vice President
451 West 35th Street
Riviera Beach, FL 33404

Claudine Cotton, Treasurer
451 West 35th Street
Riviera Beach, FL 33404

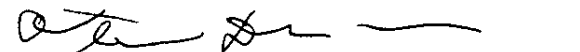
Deborah Raing, Secretary
P. O. Box 2504
West Palm Beach, FL 33402

Janie Peters, Assistant Secretary
1600 – 44th Street
West Palm Beach, FL 33407

ARTICLE VI. The name and **Florida street address** (P.O. Box **NOT** acceptable) of the initial Registered Agent.

Otelia DuBose, Ph.D.
115 Saratoga Blvd. E.
Royal Palm Beach, FL 33411

I hereby take responsibility as the registered agent for the above said Florida Non-Profit Corporation.



Signature

ARTICLE VII. The name and address of the Incorporator.

Deborah Raing
P. O. Box 2504
West Palm Beach, FL 33402