

N18 000 003 295

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

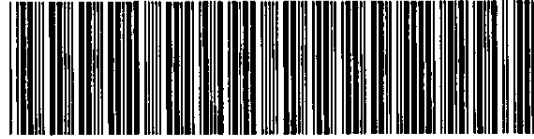
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
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MAR 27 2018

**COVER LETTER**

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

SUBJECT: CARE for the Aging Corp  
(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: Sephlyn Patterson  
Name (Printed or typed)

32101 SW 204 Ct  
Address

Homestead FL 33030  
City, State & Zip

305-246-3309  
Daytime Telephone number

spatthe@yahoo.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: CARE FOR The Aging Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

32101 SW 204 COURT  
HOMESTEAD  
FLORIDA 33030

Same AS principal  
address

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: My purpose, mission and goal are to obtain funding, grants for the elderly who desperately need to remain in their homes and receive personal care and companionship instead of going to a Nursing Home, where they feel abandoned and neglected. Some die shortly after they are admitted, I am a CNA, I am experiencing (attached)

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: They were elected By A Vote

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sephlyn Patterson, founder Name and Title:

Address 32101 SW 204 Ct Address:  
Homestead  
FL, 33030

Name and Title: Andrea Forbes, Director Name and Title:

Address 5641 Kingsport Drive Address:  
Atlanta, GA 30342

Name and Title: TRICIA FORBES, Director Name and Title:

Address 16422 SW 281 St Address:  
Miami, FL  
33033

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Name and Title: Calvin Patterson, Director Name and Title: \_\_\_\_\_

Address: 32101 SW 204 Ct Address: \_\_\_\_\_  
Homestead, \_\_\_\_\_  
FL 33030 \_\_\_\_\_

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: Sephlyn Patterson

Address: 32101 SW 204 COURT  
Homestead, FL 33030

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**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Sephlyn Patterson

Address: 32101 SW 204 COURT  
HOMESTEAD, FL 33030

**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 days prior or 90 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*

Sephlyn Patterson  
Required Signature of Registered Agent

3/8/2018  
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.*

Sephlyn Patterson  
Required Signature of Incorporator

3/8/2018  
Date

The purpose for which the  
Corporation is organized

these issues. on a daily Basis.  
It is very troubling to me. My  
Heart goes out for these aging  
adults at this time of their  
life. My goal is to provide  
personal care for as many  
elderly as I possible can,

Sophy Patterson - 3/8/2018

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