

Florida Department of State  
Division of Corporations  
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Email Address: paul@feldmanclosings.com

FLORIDA PROFIT/NON PROFIT CORPORATION

Rom Care Foundation, Inc.

Certificate of Status	0
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**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**The name of the corporation shall be: ROM CARE FOUNDATION, INC.**ARTICLE II PRINCIPAL OFFICE**Principal street address:1061 Harbor CourtHollywood, FL 33019

Mailing address, if different is:

**ARTICLE III PURPOSE**

Said corporation is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: Directors shall be appointed by majority vote of the existing directors.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Maya Ioana Cacenco, co-President

Address: 1061 Harbor Court  
Hollywood, FL 33019

Name and Title: Luca Georgescu, co-President

Address: 1638 NE 6th Ave  
Ft. Lauderdale, FL 33304

Name and Title: Aurelian Cacenco, Secretary

Address: 1061 Harbor Court  
Hollywood, FL 33019

Name and Title: Bogdan Georgescu, Treasurer

Address: 1638 NE 6th Ave  
Ft. Lauderdale, FL 33304

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
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**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Paul Feldman, Esq.  
Address: 2750 NE 185th Street, Suite 203  
Aventura, FL 33180

**ARTICLE VII INCORPORATOR**The name and address of the incorporator is:

Name: Paul Feldman, Esq.  
Address: 2750 NE 185th Street, Suite 203  
Aventura, FL 33180

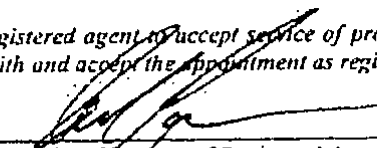
**ARTICLE VIII EFFECTIVE DATE:**

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*

  
\_\_\_\_\_  
Required Signature of Registered AgentFebruary 26, 2019

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 IncorporatorFebruary 26, 2019

Date