

N230 0000 5630

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

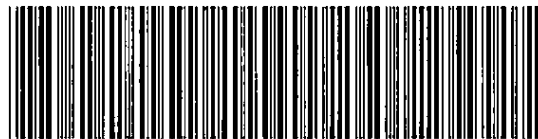
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300401655133

02/07/23--01013--003 **79.90

2023 APR 27 PM 12:24

Attachment

6

W23-24749

COVER LETTER

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

SUBJECT: CARING is LIVING Foundation 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: Isaac Barst
Name (Printed or typed)

119 Old Airport Rd 40
Address

CA. GRANGE GA 30240
City, State & Zip

206-898-8685
Daytime Telephone number

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

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

CARING IS LOVING FOUNDATION + INC

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

~~CARING IS LOVING INC~~

ARTICLE II PRINCIPAL OFFICE

CARING IS LOVING FOUNDATION INC

Principal street address:

5352 GATE LAKE Rd.
TAMARAC, Florida
33319

Mailing address, if different is:

(same)

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Nonprofit organization
public to serve families leprostatic in
our community

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

Appointed By A Quorum of Members

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

President CARLOS
PAROISE

Name and Title:

Address:

5352 Gate Lake Rd
TAMARAC, FL 33319

Address:

Name and Title:

VP. MARK M. JONES

Name and Title:

Address:

5352 Gate Lake Rd
TAMARAC, FL 33319

Address:

Name and Title:

Isaac Bash Ture

Name and Title:

Address:

207 Cherry St
C. GARAGE, GA
30240

Address:

2023 APR 27 PM 12:24

FILED

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:

Carlos Paroisse

Address:

5352 Gate Lake Rd
TAMARAC, Florida 33319

FILED
2023 APR 27 PM 12:24
TALLAHASSEE, FL

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Carlos Paroisse MA

Address:

5352 Gate Lake Rd
Florida, TAMARAC 33319

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

Carlos Paroisse
Required Signature of Registered Agent

1/25/23
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.

Carlos Paroisse
Required Signature of Incorporator

1/25/23
Date