

N24000004486

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(Address)

(Address)

(City/State/Zip/Phone #)

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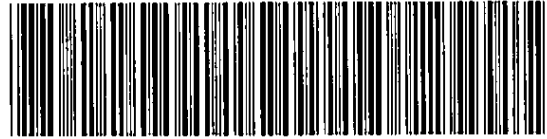
(Business Entity Name)

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TALLAHASSEE, FLORIDA

FILED
2024 APR 12 AM 9:37
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

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

SUBJECT: AFFECTIONATE SENIOR CARE, 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: NIKITA FLOYD

Name (Printed or typed)

1515 E SILVER SPRING

Address

OCALA, FL 34470

City, State & Zip

352 812-8136

Daytime Telephone number

Nikitafloyd1@hotmail.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FL

2024 APR 12 AM 9:30

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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: AFFECTIONATE SENIOR CARE, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
1515 E SILVER SPRING

OCALA, FL 34470

Mailing address, if different is:

805 NW 23rd AVE

OCALA FL 34475

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: SEE ATTACHMENT

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: FLOYD, NIKITA (Pres. VP Sec. Treas.)

Address: 1515 E SILVER SPRING
OCALA, FL 34470

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE FL

2024 APR 12 AM 9:30

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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: NIKITA FLOYD

Address: 1515 E SILVER SPRING

OCALA, FL 34470

ARTICLE VII INCORPORATOR

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

Name: NIKITA FLOYD

Address: 1515 E SILVER SPRING

OCALA, FL 34470

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:

Nikita Floyd
Required Signature of Registered Agent

4/6/2024

FILED
2024 APR 12 AM 9:37
CLERK OF STATE
TALLAHASSEE FL

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.

ATTACHMENT TO
ARTICLES OR INCORPORATION
OF
AFFECTIONATE SENIOR CARE, INC.

Said Corporation is organized and shall be operated exclusively for Charitable, educational and scientific purposes, including, for such purposes, the making of distribution to organizations that qualify as exempt organizations under section 501 (C) 3 of the Internal Revenue Code, or the corresponding section of any future federal tax code. The business activity for said organization is as follows: *to provide home health care and basic needs services to the elderly and disabled.*

No part of the earnings of the Corporation shall inure to the benefit of or be distributed to its Members, Trustees, or Officers; except that the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distribution in furtherance of the purposes set forth hereto.

No substantial part of the activities of the Corporation shall be the carrying out of propaganda, or otherwise attempting to influence legislation, and the Corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office. Notwithstanding any other provision of these articles, the Corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from federal income tax under section 501 (C) 3 of the Internal Revenue Code, or the corresponding section of any future federal tax code, or (b) by a corporation, contributions to which are deductible under section 170 (c)(2) of the Internal Revenue Code, or the corresponding section of any federal tax code.

Upon the dissolution of the Corporation, the Board of Directors shall after paying or making provisions for the payment of all the liabilities of the Corporation, dispose of all of the assets of the Corporation exclusively for the purposes of the Corporation in such manner, or to such organization or organizations organized and operated exclusively charitable, educational, religious, or scientific purposes; as shall at the time qualify as an exempt organization or organizations under section 501 (C) 3 of the Internal Revenue Code of the corresponding provisions of any future federal tax Code as the Board of Trustees shall determine. Any such assets not so disposed of shall be disposed of by the Court of Competent jurisdiction of the country in which the principal office of the Corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are

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APR 12 2011
OFFICE OF THE CLERK
STATE OF CALIFORNIA