

TRANSMITTAL LETTER

PO0000111771

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

SUBJECT: Elder Care Management Services, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

700003488767--2
-12/06/00--01020--001
*****78.75 *****78.75

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 of
Status

ADDITIONAL COPY REQUIRED

FROM:

Yolanda I. Juan
Name (Printed or typed)

3924 W. Bird Street
Address

TRUFA FLA 33614
City, State & Zip

813-806-9615
Daytime Telephone number

00 DEC -6 AM 9:14
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Feb
12/6

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

ElderCare Management Services.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3924 W. Bird ST TAMPA, FLA 33614.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

minority vendor specializing in cultural and minority issues in the FLA Elderly population.

ARTICLE IV SHARES

The number of shares of stock is:

100 shares

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Yolanda I. Juan
3924 W. Bird ST
TAMPA FL 33614

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Yolanda I. Juan
3924 W. Bird ST
TAMPA FLA 33614

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Yolanda I. Juan
3924 W. Bird ST
TAMPA, FLA 33614

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

Signature/Registered Agent

Date

Signature/Incorporator

Date

FILED
00 DEC -6 AM 9:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12-4-00

12-4-00