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TRANSMITTAL LETTER

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

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-12/21/00--01046--018
*****87.50 *****87.50

SUBJECT: CARING LIFESTYLES CO.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

EFFECTIVE DATE
1-1-01

Enclosed is an original and one(2) 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: JOSEPH D MILES
Name (Printed or typed)

2643 SUNCREST DR
Address

SARASOTA FLA 34239
City, State & Zip

941 923 7421
Daytime Telephone number

12/21

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

FILED
00 DEC 21 AM 9:48
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION

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

FILED
00 DEC 21 AM 9:48
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be: CARING LIFESTYLES CO.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 4791 ASHTON RD
SARASOTA FLA 34233

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: FOR THE CARE OF ELDERLY PEOPLE.

ARTICLE IV SHARES

The number of shares of stock is: 100

EFFECTIVE DATE
1-1-01

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

JOSEPH D. MILES JR - 2643 SUNCREST DR SARASOTA FLA 34239
MARGARET JANE BERTOLETT - 4791 ASHTON RD SARASOTA FLA 34233
CAROL ANN HARDIN - 5459 CREEPING HAMMOCK DR SARASOTA FLA 34231

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** of the registered agent is: JOSEPH D. MILES JR.
2643 SUNCREST DR.
SARASOTA FLA 34239

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is: JOSEPH D. MILES JR
2643 SUNCREST DR
SARASOTA FLA 34239

ARTICLE VIII EFFECTIVE DATE

THE EFFECTIVE DATE OF THE CORPORATION SHALL BE 01/01/01

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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

Joseph D Miles Jr
Signature/Registered Agent

12/18/00
Date

Joseph D Miles Jr.
Signature/Incorporator

12/18/00
Date