

Division of Corporations

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## Florida Department of State

Division of Corporations

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Katherine Harris, Secretary of State

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## To:

Division of Corporations  
Fax Number : (850) 205-0381

## From:

Account Name : CHEVOLO ACCOUNTING, INC.  
Account Number : I20000000167  
Phone : (954) 777-0082  
Fax Number : (954) 777-0062

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## FLORIDA PROFIT CORPORATION OR P.A.

TRINITY CARE SYSTEMS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

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**ARTICLES OF INCORPORATION  
OF**

**TRINITY CARE SYSTEMS, INC.**

In compliance with Chapter 607 and/or Chapter 621 Florida Statutes, the undersigned incorporates, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

**ARTICLE 1 NAME**

The name of the corporation shall be: **TRINITY CARE SYSTEMS, INC.**

**ARTICLE 11 PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:  
7481 N W 13<sup>th</sup> Street, Plantation, Florida 33313

**ARTICLE 111 PURPOSE**

This corporation may engage in or transact any or all-lawful activities of business permitted under the laws of the United States, the State of Florida, or any other state, country, or nation.

**ARTICLE 1V SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

**TWELVE THOUSAND (12000) SHARES OF COMMON STOCK WITH A PAR  
VALUE OF ONE DOLLAR (\$1.00) PER SHARE.**

**ARTICLE V TERM OF EXISTANCE**

This corporation is to exist perpetually.

**ARTICLE VI INITIAL OFFICERS / DIRECTORS**

The name and street address of the initial officer and directors is:

**Pauline Anglin – 7481 N W 13<sup>th</sup> Street, Plantation, Fl 33313**

**President / Director**

**Widlyn Davis - 11280 N W 42<sup>nd</sup> Street, Coral Springs, Fl 33065**

**Director / Secretary**

**Arlene Campbell – 3200 N W 112<sup>th</sup> Avenue, Coral Springs, Fl 33065**

**Director / Treasury**

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TALLAHASSEE, FLORIDA

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Raymond Anglin - 7481 N W 13<sup>th</sup> Street, Plantation, FL 33313

Director

Nadine Orrell - 11280 N W 42<sup>nd</sup> Street, Coral Springs, FL 33065

Director

Norman Campbell - 3200 N W 112<sup>th</sup> Avenue, Coral Springs, FL 33065

Director

**ARTICLE VII INCORPORATORS**

The name and address of the incorporator of these Articles of Incorporation is:

Pauline Anglin - 7481 N W 13<sup>th</sup> Street, Plantation, FL 33313

IN WITNESS WHEREOF, The undersigned incorporator have executed these Articles of Incorporation this:

2<sup>nd</sup> Day of July, 2001Pauline E. AnglinSTATE OF FLORIDA  
COUNTY OF BROWARD

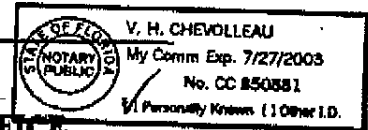
THE FOREGOING instrument was acknowledged and sworn before me this

2<sup>nd</sup> day of July, 2001, by Mrs. Pauline Anglinof FRINITY CORE SYSTEMS, INC.

Notary Public

V. H. Chevolleau

My Commission Expires

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT / REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 of 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office / registered agent, in the State of Florida.

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The name of the corporation is: **Trinity Care Systems, Inc.**

The name and address of the registered agent and officer is:

**Pauline Anglin**

**7481 N W 13<sup>th</sup> Street, Plantation, Fl 33313**

Having been named as registered agent and to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my position as registered agent.

SIGNATURE Pauline E. Anglin DATE 7/2/01

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TALAHASSEE, FLORIDA

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