1-01000093743 TRANSMITTAL LETTER



OI SEP 21 PH 2: 07

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

90004577249--9 -09/10/01--01025--005 \*\*\*\*\*87.50 \*\*\*\*\*\*87.50

SUBJECT:	WE	CARE	FOR	YOU.	Inc.			
•			(PR	OPOS	ED COR	PORATE NAME	- MUST INCL	UDE SUFFIX)

Enclosed are an orig	inal and one (1) copy of the arti	icles of incorporation and	d a check for:				
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED				
FROM:	Mr. Clyde J. Cole Name (Printed or typed)						
	6425 N.W. 55th Street Address						
	Coral Springs, FL 33067 City, State & Zip						
	954–828–5158 Daytime T	Celephone number					

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

182,2557,319,2550 WOI-21317



## FLORIDA DEPARTMENT OF STATE Katherine Harris

Katherine Harris Secretary of State

September 13, 2001

CLYDE J. COLE 6425 N.W. 55TH STREET CORAL SPRINGS, FL 33067

SUBJECT: WE CARE FOR YOU, INC.

Ref. Number: W01000021317

We have received your document for WE CARE FOR YOU, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.)

The registered agent must sign accepting the designation.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6972.

Letter Number: 901A00051473

Doris Brown Document Specialist New Filings Section

9-15-01 01 SEP 21 PH 2:07

## **Articles of Incorporation**

### WE CARE FOR YOU, Inc.

#### Article I - Name of Corporation:

**4**,

WE CARE FOR YOU, Inc.

Article II - Principal Place of Business and Mailing Address: The initial principal place of business and its mailing address is as follows:

WE CARE FOR YOU, Inc. 11290 Heron Bay Boulevard, #2015 Coral Springs, FL 33076

#### Article III - Purpose of Corporation:

WE CARE FOR YOU, Inc. is a for profit corporation formed to:

- (a) provide personalized non-medical services to people that require full or part time assistance with their daily living,
- (b) generally carry on , conduct, promote, and undertake any business transactions or operations commonly carried on, conducted, promoted, operated, or undertaken by companies engaged in the personal services industry
- (c) to carry on any lawful business or activities related to any of the foregoing purposes, and
- (d) engage in any lawful act or activity for which corporations may be organized under the laws of the State of Florida.

#### Article IV - Authorized Stock Issuance:

The Corporation is authorized to issue up to 1,000 shares of common stock having a par value of \$1.00 per share.

#### Article V - Manner of election of directors:

Methods of election are as set forth in the bylaws of the corporation.

Article VI - Initial registered agent and street address:

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

Mr. Clyde J. Cole 6425 N.W. 55<sup>th</sup> Street Coral Springs, FL 33067

Article VII - Name and Address of Incorporator:

Mr. Steven Israel 11290 Heron Bay Boulevard, #2015 Coral Springs, FL 33076

Article VIII - Effective Date of Incorporation:

The effective date of incorporation is September 15, 2001

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation.

Steven Israel

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501 or 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.

1.	The name of the Corporation is:			
	We Care For You, Inc.			
2.	The name and address of the registered agent and office is:			
	Clyde J. Cole			
	(Name)			
	6425 N.W. 55th Street			
	(P.O. Box NOT acceptable)			
	Coral Springs, FL 33067			
(City/State/Zip)				

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 duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature

Date

CR2E064(2/00)