

TRANSMITTAL LETTER

**P02000057732**

Department of State  
Division of Corporations  
P.O. Box 37  
Tallahassee, FL 32314

SUBJECT: Veronica's CARE Incorporated  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

100005599881--8  
-05/23/02--01054--016  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Enclosed are 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: Veronica LaQuan Martin  
Name (Printed or typed)

2321 11<sup>th</sup> St. So.  
Address

St. Petersburg, Fla. 33705  
City, State & Zip

727-365-9464  
Daytime Telephone number

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

*[Handwritten signature]*

FILED  
02 MAY 23 PM 4:24  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

# 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:

Veronica's CARE Incorporated

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2321 11<sup>th</sup> St. South  
St. Petersburg, Fla. 33705

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

6 Bed Residential  
Habilitation (Group Home)  
Persons with Developmental Disabilities

## ARTICLE IV SHARES

The number of shares of stock is:

100 shares

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Veronica LaQuan MARTIN  
2321 11<sup>th</sup> St. So.  
St. Petersburg, Fla. 33705

(President)

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TALLAHASSEE FLORIDA

## ARTICLE VI REGISTERED AGENT

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

Veronica LaQuan MARTIN  
2321 11<sup>th</sup> St. So.  
St. Petersburg, Fla. 33705

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Veronica LaQuan MARTIN  
2321 11<sup>th</sup> St. So., St. Petersburg, Fla. 33705

\*\*\*\*\*  
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