

TRANSMITTAL LETTER
P2000090542

FILED
DIVISION OF CORPORATIONS
02 AUG 16 AM 8:21

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

SUBJECT: PHOENIX SUPPORTED LIVING SERVICES, INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

300006924563--4
-08/06/02--01063--010
*****78.75 *****78.75

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☒ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: KarenMaria Lynch

Name (Printed or typed)

9707 Cedar St.

Address

Tampa, FL, 33635

City, State & Zip

813-889-7057

Daytime Telephone number

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

602-22841
S25
8/21



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

8/14

August 7, 2002

KAREN MARIA LYNCH
9707 CEDAR STREET
TAMPA, FL 33635

SUBJECT: PHOENIX SUPPORTED LIVING SERVICES, INC.
Ref. Number: W02000022841

We have received your document for PHOENIX SUPPORTED LIVING SERVICES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

PLEASE CORRECT THE SPELLING IN ARTICLE I, IF NEEDED

The document must state the number of shares of authorized stock.

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) 245-6965.

Shannon Elliott
Document Specialist
New Filing Section

Letter Number: 902A00047199

FOR THE SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA 32314

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:

PHOENIX SUPPORTED LIVING SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9707 CEDAR ST.
TAMPA, FL. 33635

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SUPPORTED LIVING/SOCIAL ASSISTANCE

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

KarenMaria Lynch, Owner
9707 Cedar St.
Tampa, Fl. 33635

ARTICLE VI REGISTERED AGENT

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

KarenMaria Lynch
9707 Cedar St.
Tampa, Fl. 33635

ARTICLE VII INCORPORATOR

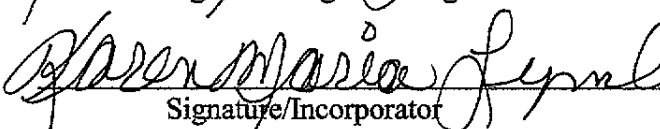
The name and address of the Incorporator is:

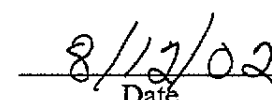
KarenMaria Lynch
9707 Cedar St.
Tampa, Fl. 33635

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
CLERK OF DISTRICT COURT
02 AUG 16 AM 8:22
DIVISION OF CORPORATION