

TRANSMITTAL LETTER

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

SUBJECT: Total Home Care Services Co.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

600007318056--7
-08/23/02--01076--003
*****87.50 *****87.50

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:

Annie Mecias
Name (Printed or typed)

16277 NW 13th Street
Address

Pembroke Pines FL 33028
City, State & Zip

954-442-0719
Daytime Telephone number

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
02 SEP -5 PM 2:30

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

~~2-24-07~~



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

August 26, 2002

ANNIE MECIAS
16277 NW 13TH ST.
PEMBROKE PINES, FL 33028

SUBJECT: TOTAL HOME CARE SERVICES CO.
Ref. Number: W02000024674

We have received your document for TOTAL HOME CARE SERVICES CO. 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6995.

Wanda Cunningham
Document Specialist
New Filing Section

Letter Number: 802A00049780

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:

Comprehensive Home Care Service Co.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

16277 NW 13th St. Pembroke Pines, FL 33028

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The Corporation is organized for the purpose of engaging in any activity or business permitted under the laws of the United States and the State of Florida

ARTICLE IV SHARES

The number of shares of stock is:

The Corporation is authorized to issue one Hundred Shares (100) of (\$5.00) per value Common Stock, which shall be designated "Common Shares".

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Annie Mecias	President	16277 NW 13th St	Pembroke Pines, FL 33027
Juan L. Mecias	Vice President	16277 NW 13th St.	Pembroke Pines, FL 33027
Annie P. Mecias	Secretary - Treasurer	16277 NW 13th St.	Pembroke Pines, FL 33027

ARTICLE VI REGISTERED AGENT

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

Annie Mecias
16277 NW 13th St.
Pembroke Pines, FL 33027

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Annie Mecias
16277 NW 13th St.
Pembroke Pines, FL 33027

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
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 SEP -5 PM 2:30

8/20/02

8/20/02