

PD20000114838

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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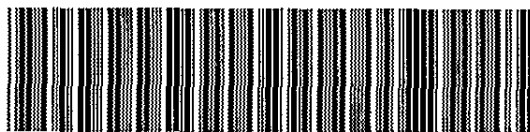
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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U.S. DEPT. OF JUSTICE

3m 12/25

## TRANSMITTAL LETTER

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

Subject: *BURTON'S HEALTH CAREER, INC*  
(Proposed Corporate Name)

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

☐ \$70.00    ☐ \$78.75    ☐ \$122.50    ☒ <sup>88.00</sup>~~\$131.25~~

FROM: *THELMA BURTON*

Name (printed or typed)

*7499 NW 48<sup>th</sup> ST.*

Address

*LAUDER HILL, FL 33319*

City, State & Zip

*954 572 6998*

Daytime telephone number

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32314

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

## ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

### ARTICLE 1 NAME

The name of the corporation shall be: *BURTON'S HEALTH CAREER, INC.*

### ARTICLE 11 PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

*7499 NW 48<sup>th</sup> ST  
LAUDERHILL, FL 33319*

### ARTICLE 111 SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: *1000*

*One thousand*

*10* ~~Five hundred~~ (1000) shares of common stock having a par value of one dollar (\$1) each.

### ARTICLE IV

### INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

*THELMA BURTON  
7499 NW 48 STREET  
LAUDERHILL, FL 33319*

ARTICLE V

INCORPORATOR(S)

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SECRETARY OF STATE  
TALLAHASSEE, FL 32304

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The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

THELMA BURTON  
7499 NW 48<sup>th</sup> ST.  
LAUDER HILL, FL 33319

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this



Signature

Signature

Signature

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

PURSUANT TO THE PROVISION 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:  
*BURTON'S HEALTH CAREER, INC*
2. The name and address of the registered agent and office is:  
*THELMA BURTON*  

Name  
*7499 NW 48<sup>th</sup> ST.*  
(P.O. Box not acceptable)  
*LAUDERHILL, FL 33319*  
(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.

*Thelma Burton*  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*10-2-02*

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SECRETARY OF STATE

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