

PO3000009178

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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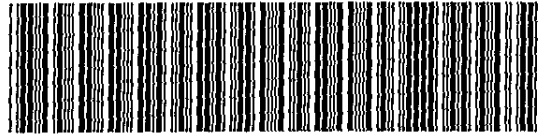
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: A-1 HEALTH & HUMAN SERVICES
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: PATRICIA WILLIAMS
Name (Printed or typed)

3364 SW CRESTVIEW RD
Address

PORT ST. LUCIE, FL 34953
City, State & Zip

772-201-8128
Daytime Telephone number

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

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:

A-1 Health & Human Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3364 SW Crestview Rd.

Pt. St. Lucie, FL 34953

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any legal business in the State of Florida. Human service in particular.

ARTICLE IV SHARES

The number of shares of stock is:

One Thousand Shares (1000)

ARTICLE V INITIAL OFFICERS/DIRECTORS

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

<i>Patricia Williams</i>	<i>3364 SW Crestview Rd., Pt. St. Lucie, FL 34953</i>	<i>President</i>
<i>Al Johnson</i>	<i>3364 SW Crestview Rd., Pt. St. Lucie, FL 34953</i>	<i>Vice Pres</i>
<i>Patricia Williams</i>	<i>3364 SW Crestview Rd., Pt. St. Lucie, FL 34953</i>	<i>Secretary</i>
<i>Al Johnson</i>	<i>3364 SW Crestview Rd., Pt. St. Lucie, FL 34953</i>	<i>Treasurer</i>

ARTICLE VI REGISTERED AGENT

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

Al Johnson 2057 S US 1, Ft Pierce, FL 34950

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Patricia Williams 3364 SW Crestview Rd., Pt. St. Lucie, FL 34953

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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

 Al Johnson
Signature/Registered Agent

1/9/03
Date

 PATRICIA Williams
Signature/Incorporator

1/9/03
Date

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TALLAHASSEE, FLORIDA