

PD20000021854

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

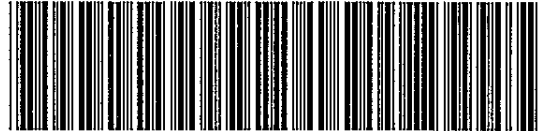
(Business Entity Name)

(Document Number)

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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: Senior HealthCare Consultants, Inc.
(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
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: Randall P. Feters
Name (Printed or typed)

10110 Glenmore Avenue
Address

Bradenton, FL 34202
City, State & Zip

941-361-2466
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:

Senior HealthCare Consultants, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

Place of business: 9090 58th Drive East, Suite 200, Bradenton, Florida, 34203

Mailing address: PO Box 50992, Sarasota, Florida, 34232

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Insurance Sales

ARTICLE IV SHARES

The number of shares of stock is:

1,000 Shares

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

ARTICLE VI REGISTERED AGENT

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

Randall P. Feters
10110 Glenmore Avenue
Bradenton, FL 34203

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Randall P. Feters
10110 Glenmore Avenue
Bradenton, FL 34203

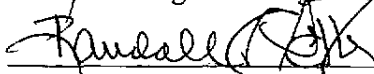
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

02/19/03

Date



Signature/Incorporator

02/19/03

Date