

PO3000030704

TRANSMITTAL LETTER

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

SUBJECT: Precious, Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

200008103232--6
-03/30/02--01062--005
*****87.50 *****87.50

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

<input type="checkbox"/> \$70.00 Filing Fee	<input type="checkbox"/> \$78.75 Filing Fee & Certificate of Status	<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED			

FROM: MARCIA GILLESPIE
Name (Printed or typed)

25352 Seven Rivers Circle
Address

LAND O LAKES FL 34639
City, State & Zip

(813) 994-1228
Daytime Telephone number

FILED
03 MAR 18 AM 9:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Marcia Gillespie
GAVE

AUTHORIZATION BY PHONE TO

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

DATE 03-18-03

DOC. EXAM gr

✓

2037662
gr 10/



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State

October 1, 2002

MARCIA GILLESPIE
25352 SEVEN RIVERS CIRCLE
LAND O' LAKES, FL 34639

SUBJECT: PRECIOUS, INC.
Ref. Number: W02000028424

We have received your document for PRECIOUS, INC. 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 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) 245-6878.

Alan Crum
Document Specialist
New Filing Section

Letter Number: 302A00055345

ARTICLES OF INCORPORATION
In Compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

OF

Precious, Inc.

ARTICLE I

Name

The Name of the corporation shall be: **PRECIOUS, Inc.**

ARTICLE II

Principal Office

The principal place of business/ mailing address is:
25352 Seven Rivers Circle, Land O Lakes, FL 34639

ARTICLE III

Purpose

The purpose of the organization is to provide quality one on one private duty
Nursing as directed by a physician, in the privacy of a patient's home.

ARTICLE IV

Shares

The number of stock is: *one*

ARTICLE V

Initial Officers/ Directors

Marcia Gillespie, LPN
President/Owner
25352 Seven Rivers Circle
Land O Lakes, FL 34639

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TALLAHASSEE FLORIDA

**ARTICLE VI
Registered Agent**

The Name and address of the registered agent is:

**Marcia Gillespie, LPN
25352 Seven Rivers Circle
Land O Lakes, FL 34639**

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TALLAHASSEE, FLORIDA**

**ARTICLE VII
INCORPORATOR**

The Name and address of the incorporator is:

**Marcia Gillespie, LPN
25352 Seven Rivers Circle
Land O Lakes, FL 34639**

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

Marcia Gillespie
Signature Registered Agent

9/25/22
Date

Marcia Gillespie
Signature of Incorporator

9/25/22
Date