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STATE
DIVISIONS
FLORIDA

03 MAY - 1 AM 8:39

RECEIVED

03 MAY - 1 AM 9:10

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DIVISIONS
FLORIDA

TRANSMITTAL LETTER

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

SUBJECT:

H. Selective Choices INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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:

Kimmie Golden
Name (Printed or typed)

P.O. Box 433
Address

Havana, FL 32333
City, State & Zip

(850) 545-3721
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)

03 MAY -1 AM 9:10

ARTICLE I NAME

The name of the corporation shall be:

K. Selective Choices INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Kimmie S. Golden P.O. Box 433 Hallandale, FL 32333

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Organized to provide service to people with Developmental Disability

ARTICLE IV SHARES

The number of shares of stock is:

/

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Kimmie S. Golden Directors

ARTICLE VI REGISTERED AGENT

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

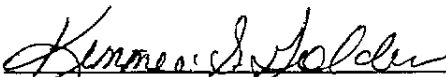
Kimmie S. Golden 10 Harbor Rd. Hallandale, FL 32333

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Kimmie S. Golden 10 Harbor Road Hallandale, FL 32333

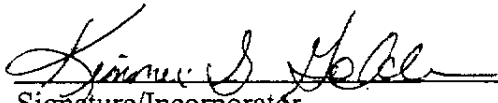
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

4-30-03

Date



Signature/Incorporator

4-30-03

Date

5-1-03

I Kimmer Golden will not receive
Notification of K. Selective Choice, etc.
I Release the Name to be Anonymous.

Kimmer Golden

Kimmer Golden

DRivers Lic # G435-517-67-804-0

FILED
STATE OF ARIZONA
DIVISION OF
REGISTRATION
03 MAY -1 AM 9:10



Judy Sadler
MY COMMISSION # DD127124 EXPIRES
January 24, 2006
BONDED THRU TROY FAIR INSURANCE INC

Judy Sadler