

P03000064420

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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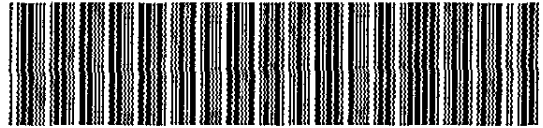
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2003 JUN -9 AM 10:27
SEC. OF STATE
TALLAHASSEE, FLORIDA

06-11-03
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TRANSMITTAL LETTER

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

SUBJECT: PINNACLE HOME HEALTHCARE, 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 ☐ \$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: Allen Corporation Supply
Name (Printed or typed)

10440 Pioneer Blvd. (8)
Address

Santa Fe Springs, CA 90870
City, State & Zip

(562) 906-1635
Daytime Telephone number

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

ARTICLES OF INCORPORATION OF
PINNACLE HOME HEALTHCARE, INC.

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

I. NAME

The name of the corporation is:
PINNACLE HOME HEALTHCARE, INC.

II. PRINCIPAL OFFICE

The principal place of business/mailling address is:
10105 Holcomb Court, Orlando, FL 32836

III. PURPOSE

The purpose for which the corporation is organized is:
Any lawful activity for which a corporation may be formed under the laws
of the State of Florida.

IV. SHARES

The number of shares of stock is:
10,000

V. INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

VI. REGISTERED AGENT

The name and address of the registered agent is:
Dennis Heide
10105 Holcomb Court
Orlando, FL 32836

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TALLAHASSEE, FLORIDA

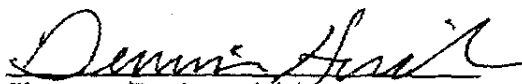
VII. INCORPORATORS

The names and addresses of the Incorporators are:

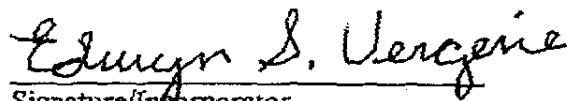
Edwyn S. Vergeire
2279 Root St.
Fullerton, CA 9833

Dennis Heide
10105 Holcomb Court
Orlando, FL 32836

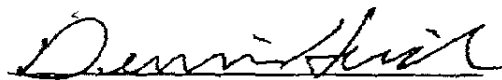
Having been named as registered agent to accept service of process for the above state corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Signature/Registered Agent
Dennis Heide

5/26/03
Date


Signature/Incorporator
Edwyn S. Vergeire

5/29/03
Date


Signature/Incorporator
Dennis Heide

5/26/03
Date