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TRANSMITTAL LETTER

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

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TE INC. SUBJECT: OSED CORPORATE MUST INCLUE

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

□ \$70.00 Filing Fee	X \$78.75 Filing Fee & Certificate of Status	 \$78.75 Filing Fee Certified Copy ADDITIONAL CO 	 \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED 	
FROM: DAYQUEL QUINTANA Name (Printed or typed)				
	8070 SW 157 PLACE			
MIMI, & 33193				
City, State & Zip (305) 632-6888				
Daytime Telephone number				

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

ARTICLES OF INCORPORATION FILED In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) 03 JUN -9 AM 8:01 ARTICLE I NAME The name of the corporation shall be: XANADU'S PALACE FAMILY HONE AND SECRETARY OF STATE ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 8070 SW 157 PLACE MIANI, FL 33193 PURPOSE ARTICLE III The purpose for which the corporation is organized is: HSSISTED LIVING FACILITY ARTICLE IV SHARES The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): DAYOUEL QUINTANA 8070 SW 157 PLACE MIANII. & 33193 (PRESIDENT) ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: DAYQUEL QUINTANA 8070 SW 157 PLACE MIAMI, FZ 33193 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: DAYQUEL QUINTANA 8070 SW 157 PLACE MIANI, FL 33193 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 enature/Incorporator