

PG3000081454

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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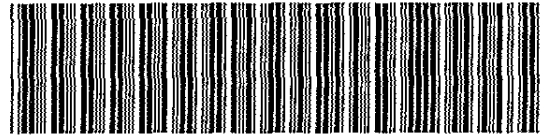
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

JF 7/25/03

TRANSMITTAL LETTER

FILED

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

2003 JUL 21 AM 10:19

SECRETARY OF STATE
TALLAHASSEE FLORIDA

SUBJECT: An Independent Way, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

*105 ☒ \$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: Barbara Nagy, An Independent Way dba Home Instead Senior Care Franchise #503
Name (Printed or typed)

870 N. Cocoa Blvd, Suite A

Address

Cocoa, FL 32922

City, State & Zip

321-432-9048

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:

An Independent Way, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

870 N. Cocoa Blvd., Suite A
Cocoa, FL 32922

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Homemaker and companion service

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Barbara Nagy, 870 N. Cocoa Blvd, Apt 5, Cocoa, FL 32922; President & Secretary
Miriam Swanson, 604 Mayfair, Nashua, NH 03062; Vice President & Treasurer

ARTICLE VI REGISTERED AGENT

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

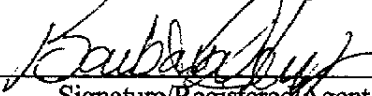
Barbara Nagy
870 N. Cocoa Blvd, Apt. 5
Cocoa, FL 32922

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Barbara Nagy
870 N. Cocoa Blvd, Apt. 5
Cocoa, FL 32922

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

7-18-03

Date



Signature/Incorporator

7-18-03

Date

FILED

2003 JUL 21 AM 10:19

SECRETARY OF STATE
TALLAHASSEE FLORIDA