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2003 AUG 29 PM 1:46

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SLUNE FRIT OF STATE FALLAHASSEE FLORIDA

SUBJECT: Precious Little Angel Louing Care, Inc

Specifical \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL COI	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	RObin S TV	ICM PSON inted or typed)	
	1160 NW/	US+ ddress	
	Lauderhill City, S	J/G - 3 State & Zip	33313.
ž.	954-587-		

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

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) The name of the corporation shall be: little Angel Loving Care JInc PRINCIPAL OFFICE The principal place of business/mailing address is: 1160 NW 145+ Lauderhill 719 33313 <u>ARTICLE III PURPOSE</u> The purpose for which the corporation is organized is: 1-amily ARTICLE IV The number of shares of stock is: ARTICLE V INITIAL OFFICERS (DIRECTORS (optional) The name(s), address(es) and title(s): Kobin S Thompson -1160 NW 147+ Landerhill 719 33313 Robin Thompson- Tres, 1160 NW 14 St Laudeshill 719 33313 Hazel Brulon Sect. 7080 NW 65+ Plantation 33317 ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: KODIN Thom USON 1160 NW 1457 Lauderhill 719 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Robins, I hompson 1160NW1457 Laudochill Fla 33313 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

Robin Mongleson

Robin Mongleson

Guy 26-03

Date

Quy -26-03

enature/Incorporator

Date