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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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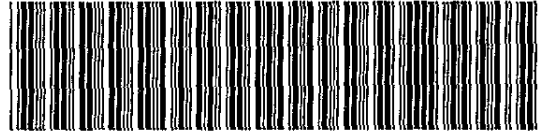
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TRANSMITTAL LETTER

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

SUBJECT: Meeting Your Needs 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: Natalie Edmond

Name (Printed or typed)

3015 Cesery Blvd.

Address

Jacksonville, Florida 32277

City, State & Zip

(904) 744-4050

Daytime Telephone Number

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

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SECRETARY OF ST.
TALLAHASSEE FLOI

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE I

CORPORATE NAME: The name of the Corporation shall be:

MEETING YOUR NEEDS INC.

ARTICLE II

PRINCIPAL OFFICE: The principal place of business and mailing address of this corporation shall be:

3015 CESERY BLVD.
Jacksonville, Florida 32277

ARTICLE III

PURPOSE: The purpose for which the corporation is organized is to conduct supported living, in home supports, transportation, personal care, companion services and respite services in accordance with the business laws for the State of Florida.

ARTICLE IV

AUTHORIZED CAPITAL STOCK: The total number of shares of which the Corporation shall have the authority to issue is 1000 shares, and the par value of each share shall be:

\$1.00/share

*ARTICLE V
INITIAL OFFICERS:*

*PRESIDENT: Natalie Edmond
3015 Cesery Blvd. Jacksonville, FL 32277*

ARTICLE VI

*INITIAL REGISTERED OFFICE/AGENT: The street address of the
Corporation's initial registered office in the State of Florida is:*

*3015 Cesery Blvd.
Jacksonville, Florida 32277*

and the name of its initial registered agent at such address is:

Gary Place

ARTICLE VII

INCORPORATOR(S): The name and address of the incorporator(s) to these Articles of Incorporation are:

*Natalie Edmond
3015 Cescery Blvd.
Jacksonville, Florida 32277
(904) 744 4050*

The undersigned has executed these Articles of Incorporation on this, the 10th day of Oct, 2003.

Natalie Edmond
Incorporator's Signature

Incorporator(s)'s Signature

.....
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.

Gay Plau
Signature of Registered Agent

30 Oct 2003

Date

Natalie Edmond
Signature of Incorporator

30 Oct 2003

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED