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SECRETARY OF STATEA

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TRANSMITTAL LETTER

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

SUBJECT:	Jennifer's	Home Care	,Inc.	
	(PROPOSED CORPORA)	IE NAME – <u>MUST INCLE</u>	UDE SUFFIX)	
Enclosed are an original	inal and one (1) copy of the artic	cles of incorporation and	a check for:	
\$70.00	\$78.75	□ \$78.75	\$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of	
		I DOTTION I A CO	Status	
		ADDITIONAL CO	PY REQUIRED	
FROM:	Jennifer	T. Gaule		
r ROWL	Name (Printed or typed)			
	100 NU	U 76 Drive		
Address				
	(6-	•	3	
-	Davime To	1) 597- 56 elephone number	<u> </u>	

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:	ىر
Jennifer's Home Care, Inc.	
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	•
7100 NW 76 Drive	
Tamarac, FL. 33321	
ARTICLE III PURPOSE	** * *
The purpose for which the corporation is organized is:	
Opening new business. Business will be	a Retirement H
ARTICLE IV SHARES	
The number of shares of stock is:	
1000	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	.
List name(s), address(es) and specific title(s):	PER SE
Jennifer I. Gayle-P. VP. T and S.	器見
7100 NW 76 Drive	25 2
Tamarac, FL 33321	PM 5: 29 SEE, FLOR
ARTICLE VI REGISTERED AGENT	F. S. S.
The name and Florida street address of the registered agent is:	92
Jennifer I. Gayle	P
7100 NM 76 Drive	
1 amagan Aton	• •
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	orr e
Jennifer I. Gayle 7100 NW 76 Drive	
Tamarac, FC 33321	
**************************************	**************************************
certificate, I am familiar with and accept the appointment as registered agent and agree to act in this	capacity
Court ash	11 14.2002
Signature/Registered Agent	11 - 17 - 2005 Date
Hirld Phyll	11-14-2003
Signature Incorporator	Date