

P04000011652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

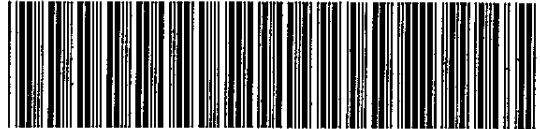
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000025796880

**EFFECTIVE DATE**

1-1-04

12/29/03--01020--009 \*\*80.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 DEC 29 AM 11:53

1-16-04

## TRANSMITTAL LETTER

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

SUBJECT: MANS HOME HEALTH CARE, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$80.00  
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: Thomas A. Klug (Florida Bar # 227471)  
Name (Printed or typed)

P.O. Box 24127 - 3626 Dunkel Rd.  
Address

Lansing, Michigan 48909  
City, State & Zip

517-332-3555  
Daytime Telephone number

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

(FOR BUREAU USE ONLY)

)DATED RECEIVED:

)  
)  
)  
)  
)  
)  
)  
)  
)  
)

CORPORATION IDENTIFICATION NUMBER: \_\_\_\_\_

RETURN DOCUMENT TO:

THOMAS A. KLUG (FLORIDA BAR #227471)  
ATTORNEY AT LAW  
3626 DUNCKEL ROAD  
PO BOX 24127  
LANSING, FLORIDA 48909

**MANS HOME HEALTH CARE, INC.  
CERTIFICATE OF ASSUMED NAME**

Pursuant to the provisions of Chapter 607 and/or 621 Florida Statutes (F.S.), as amended, the undersigned corporation executed the following Certificate:

1. The true name of the corporation is:

**MANS HOME HEALTH CARE, INC.**

2. The location of the registered office in Florida is:

**208 ELLIOT AVENUE  
SARASOTA, FLORIDA 34232**

3. The assumed name under which the business is to be transacted is:

**MANS HOME HEALTH CARE**

Signed this 10 day of November, 2003

**MANS HOME HEALTH CARE, INC.**

BY:

  
MICHAEL SPAWR, President

RETURN DOCUMENT  
UPON FILING TO:

THOMAS A. KLUG  
RAPAPORT, POLLOK, FARRELL  
& WALDRON, P.C.  
3626 DUNCKEL DR-PO BOX 24127  
LANSING, FLORIDA 48909

ORGANIZATION  
REMITTING FEES:

THOMAS A. KLUG  
RAPAPORT, POLLOK, FARRELL  
& WALDRON, P.C.  
3626 DUNCKEL DR-PO BOX 24127  
LANSING, FLORIDA 48909

NONREFUNDABLE FILING FEE: \$10.00; MAKE CHECKS PAYABLE TO THE STATE OF FLORIDA, MAIL CERTIFICATE OF ASSUMED NAME TO:

Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

(FOR BUREAU USE ONLY)

)DATED RECEIVED:

)  
)  
)  
)  
)  
)  
)  
)  
)  
)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 DEC 29 AM 11:53

CORPORATION IDENTIFICATION NUMBER: \_\_\_\_\_

RETURN DOCUMENT TO:

THOMAS A. KLUG (FLORIDA BAR #227471)  
ATTORNEY AT LAW  
3626 DUNCKEL ROAD  
PO BOX 24127  
LANSING, FLORIDA 48909

EFFECTIVE DATE  
1-1-04

**ARTICLES OF INCORPORATION  
OF  
MANS HOME HEALTH CARE, INC.**

These Articles of Incorporation are signed by the incorporators for the purpose of forming a profit corporation pursuant to the provisions of Chapter 607 and/or Chapter 621, F.S. (Profit), as follows:

**ARTICLE I - NAME**

The name of the corporation is:

**MANS HOME HEALTH CARE, INC.**

**ARTICLE II - PRINCIPAL OFFICE**

The principal place of business/mailling address is:

**208 ELLIOT AVENUE  
SARASOTA, FLORIDA 34232**

**ARTICLE III - PURPOSE**

The purpose for which the corporation is organized is to engage in any activity within the purposes for which corporations may be organized under the Statutes of Florida.

**ARTICLE IV - SHARES**

The total authorized capital stock is:

A. Common Shares: 60,000 Par Value: \$1.00

- B. A statement of all or any of the relative rights, preferences, and limitations of the shares of each class are as follows:
1. All rights as are accorded to common stock under the laws of the State of Florida.
  2. The corporation shall have the right of first refusal to buy or not, any shares in the event any shareholder desires to sell, on terms no less favorable than those offered to the selling shareholder by the bona fide third party purchaser.
  3. Each and every other shareholder shall have the second right of refusal to buy or not, any shares in the event any shareholder desires to sell, on terms no less favorable than those offered to the selling shareholder by the bona fide third party purchaser; the amount of the purchase by any shareholder shall be determined by the percentage of ownership among those remaining; in the event one or more shareholders do not desire to purchase, their shares shall be offered pro rata to those who desire to buy.
  4. If neither the corporation nor any shareholder desires to purchase the shares, said shares may then be sold to the public in accordance with the laws of the State of Florida.
- C. The shareholder of the corporation shall have the exclusive power, upon a majority vote of all issued and outstanding shares, to:
1. Declare any and all dividends, whether in case, property, or shares of this corporation, or any other corporation owned by this corporation.
  2. Ratify and approve any and all contracts or transactions between the corporation and another corporation, trust, partnership, association, individual, or any other entity having an Officer, Director, Trustee, Partner, or other form of participant with an interest in common with the corporation.
  3. Remove any or all of the Directors or Officers of the corporation at any time, without prior notice, and without cause.
  4. Amend the By-Laws and Articles of Incorporation.

#### **ARTICLE V – REGISTERED AGENT**

The name and Florida street address of the Registered Agent is:

**MICHAEL SPAWR  
208 ELLIOT AVENUE  
SARASOTA, FLORIDA 34232**

#### **ARTICLE VI – INCORPORATOR**

The name and address of the Incorporator is:

**MICHAEL SPAWR  
208 ELLIOT AVENUE  
SARASOTA, FLORIDA 34232**

## ARTICLE VII

Any action required or permitted by this act to be taken at an annual or special meeting of shareholders may be taken without a meeting, without prior notice, and without a vote, if a consent in writing, setting forth the action so taken, is signed by the holders of outstanding stock having not less than the minimum number of votes that would be necessary to authorize or take the action at a meeting at which all shares entitled to vote thereon were present and voted.

Prompt notice of the taking of the corporate action without a meeting by less than unanimous written consent shall be given to shareholders who have not consented in writing.

## ARTICLE VIII

Any action required or permitted to be taken at an annual or special meeting of the Board of Directors may be taken without a meeting, without prior notice, and without a vote, if a consent in writing, setting forth the action so taken, is signed by all of the members of the Board of Directors of the corporation on the date the action was consented to.

## ARTICLE IX

Directors of the corporation shall be elected at one time, at least annually, and each shareholder may cast as many votes for any one or more directors as the number of shares he/she owns times the number of directors to be elected.

## ARTICLE X

This corporation is a small business corporation as defined in Section 1244 of the United States Internal Revenue Code of 1954, and its capital shall qualify as "Section 1244 Common Stock" under said Section 1244.

## ARTICLE XI

Pursuant to Chapter 607 and/or Chapter 621, F.S., as amended, this document shall become effective upon filing. (January 1, 2004)

WHEREFORE I, the incorporator, have signed my name this 10 day of November 2003.

Dated: 11-10-03

  
MICHAEL SPAWR, Incorporator

I am familiar with and accept the duties and responsibilities as Registered Agent.

Dated: 11-10-03

  
MICHAEL SPAWR, Registered Agent

RETURN DOCUMENT  
UPON FILING TO:

THOMAS A. KLUG  
RAPAPORT, POLLOK, FARRELL  
& WALDRON, P.C.  
3626 DUNCKEL DR-PO BOX 24127  
LANSING, FLORIDA 48909

ORGANIZATION  
REMITTING FEES:

THOMAS A. KLUG  
RAPAPORT, POLLOK, FARRELL  
& WALDRON, P.C.  
3626 DUNCKEL DR-PO BOX 24127  
LANSING, FLORIDA 48909

NONREFUNDABLE FILING FEE: \$70.00; MAKE CHECKS PAYABLE TO THE STATE OF FLORIDA, MAIL  
CERTIFICATE OF ASSUMED NAME TO:

Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314