

PO4000028054

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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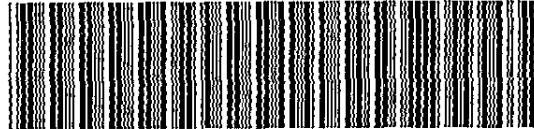
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE FLORIDA

2004 FEB 5 PM 4:42

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TRANSMITTAL LETTER

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

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2004 FEB -5 PM 4:42

SECRETARY OF STATE
TALLAHASSEE FLORIDA

SUBJECT: MedFlo 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:

☐ \$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: Flo Williams
Name (Printed or typed)

2500 East Hallandale Bch Blvd, Suite 800
Address

Hallandale FL 33009
City, State & Zip

(954) 455-1600
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:

Medflo Home Health Care, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2500 E. Hallandale Beach Blvd.,
Suite 802
Hallandale, Florida 33009

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

'Any and all lawful business'

ARTICLE IV SHARES

The number of shares of stock is:

Five Hundred (500) Shares @
US \$1.00 Per Share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Flo Williams, President
2500 East Hallandale Bch Blvd.
Suite 802
Hallandale, FL 33009

ARTICLE VI REGISTERED AGENT

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

Flo Williams
2500 East Hallandale Bch Blvd.
Suite 802
Hallandale, FL 33009

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Flo Williams
2500 E. Hallandale Bch Blvd.
Suite 802
Hallandale FL 33009

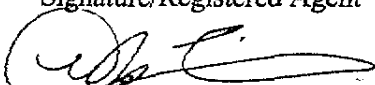
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

11/30/04

Date



Signature/Incorporator

1/30/04

Date

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