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SUCRETARY OF STATE ALLAHASSEE, FLORIDA

11, 1/19

TRANSMITTAL LETTER

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

DOC. EXAM_

SUBJECT:	ome Easy Living Provider, I (PROPOSED CORPORA	NC. NTE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original	ginal and one (1) copy of the art	icles of incorporation and	La abade for
			·
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee	☐ \$78.75 Filing Fee	☑ \$87.50
rung ræ	& Certificate of Status	& Certified Copy	Filing Fee, Certified Copy & Certificate of
		ADDITIONAL CO	Status PY REQUIRED
FROM: K	etly Stecher		
	Name	(Printed or typed)	
	13407 SW 112 Ct		
		Address	·····
	Miami, FL 33176		
	City	, State & Zip	
	305-299-6399		
	Daytime *	Telephone number	
	NOTE: Please provide the o	riginal and one conv of	f the articles
	Promo provide the o	riginal and one copy of	are milities.
Ketly	GAVE		
THORIZATION BY PH			
ORRECT 7/and	19/04		

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

ARTICLE I NAME

. . . .

The name of the corporation shall be:

In Home Easy Living Provider, Inc.

04 FEB 16 PM 3:43

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 13407 SW 112 CT Miami, FL 33176

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide in house companion, domestic and general assistance

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Ketly Stecher 13407 SW 112 CT Miami, FL 33176 President

ARTICLE VI REGISTERED AGENT

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

Ketly Stecher /3407 SW112cf MIRMI, FL 3317 C

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Ketly Stecher 13407 SW 112 CT Miami, FL 33176

Signature/Registered Agent

Signature/Incorporator

2/12/04 Date 2/12/04

Date