

P04000050082

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(City/State/Zip/Phone #)

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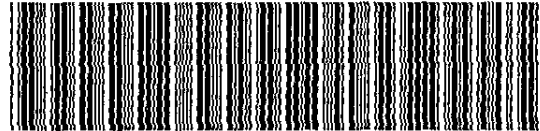
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/17/04--01041--004 **78.75

FILED
04 MAR 17 AM 11:50
TALLAHASSEE, FLORIDA

✓✓✓
2/24/04

TRANSMITTAL LETTER

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

SUBJECT: IMPERIAL 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: VALDA J. ADEYIGA
Name (Printed or typed)

7947 JOHNSON STREET, SUITE A
Address

PEMBROKE PINES, FL 33024
City, State & Zip

(954)986-2920
Daytime Telephone number

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

ARTICLES OF INCORPORATION

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ARTICLE I - NAME

The name of the corporation shall be IMPERIAL HOME HEALTH CARE, INC. SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II - PRINCIPAL OFFICE

The principal place of business /mailing address is 7947 JOHNSON STREET, SUITE A
PEMBROKE PINES, FL 33024

ARTICLE III - PURPOSE

The purpose for which the corporation is organized is TO PROVIDE HOME HEALTH
CARE SERVICES AND TRANSACT ANY OTHER RELATED/ LAWFULL
BUSINESS.

ARTICLE IV - SHARES

The number of shares of stock is 1,000 SHARES AT \$0.50 PER SHARE

ARTICLE V - INITIAL OFFICERS AND/OR DIRECTORS

Initial officers shall be:

VALDA J. ADEYIGA, PRESIDENT, 705 NW 103RD TERRACE, #9-204,
PEMBROKE PINES, FL 33026

JULIUS A. ADEYIGA, VICE PRESIDENT, 705 NW 103RD TERRACE, #9-204
PEMBROKE PINES, FL 33026

ARTICLE VI - REGISTERED AGENT

The name and address of the registered agent is

JUVEDA GROUP, INC, 7947 JOHNSON STREET, SUITE A
PEMBROKE PINES, FL 33024

ARTICLE VII - INCORPORATOR

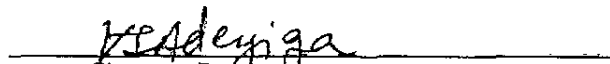
The name and address of the Incorporator is

VALDA J. ADEYIGA, 705 NE 103RD TERRACE, #9-204
PEMBROKE PINES, FL 33026

*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 to
act in this capacity.*


Signature/Registered Agent

02/24/04
Date


Signature/Incorporator

2-24-04
Date