

P040000 65737

(Requestor's Name)

(Address)

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(Business Entity Name)

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Certified Copies _____ Certificates of Status _____

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04/21/04--01022--017 **70.00

RECEIVED
04 APR 21 AM 10:54
DIVISION OF CORPORATION

FILED
04 APR 21 PM 12:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Is

TRANSMITTAL LETTER

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

SUBJECT: CareTakers Services, 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:

Patricia A. Singleton
Name (Printed or typed)

1241 W. Thorne St. CG
Address

Tall, FL 32303
City, State & Zip

850-383-1940
Daytime Telephone number

04 APR 21 PM 12:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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:

CareTakers Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1241 W. Thorpe St. C6
Tall, FL 32303

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Home Companion Services also Transportation services

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Patricia A. Singleton, President, CEO
171 O'Neal Way
Havana, FL 32333

ARTICLE VI REGISTERED AGENT

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

Patricia A. Singleton
171 O'Neal Way
Havana, FL 32333

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Patricia A. Singleton
171 O'Neal Way
Havana, FL 32333

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

Patricia A. Singleton
Signature/Registered Agent

4-21-04
Date

Patricia A. Singleton
Signature/Incorporator

4-21-04
Date

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TALLAHASSEE, FLORIDA