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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	Certificates	of Status		
Special Instructions to	Filing Officer			
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TRANSMITTAL LETTER

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

SUBJECT: Angel C	Guardian Assisted Living, Inc. (PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	final and one (1) copy of the artic	cles of incorporation and	a check for:
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	
FROM: Ro	seann J Simone		
	Name	(Printed or typed)	
	124 June Drive	Address	
	Cocoa Beach, FL 32931	State & Zip	
	City,	Brate & Lip	
	321-223-8371 Daytime To	elephone 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)

FILED

ARTICLE I NAME

The name of the corporation shall be:

Angel Guardian Assisted Living, Inc.

04 JUN 18 AM 10:51

TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 124 June Drive
Cocoa Beach, FL 32931

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Provide care to persons requiring daily living 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):

Roseann J. Simone, President 124 June Drive Cocoa Beach, FL 32931

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Roseann J. Simone 124 June Drive Cocoa Beach, FL 32931

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Signature/Incorporator

Ron A. D'Amico 2455 Palm Lake Drive Merritt Island, FL 32952