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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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2004 JUN 21 P 2: 24

TRANSMITTAL LETTER

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

SUBJECT:	Lift Care Inc				
	Lift Care Inc (PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an orig	inal and one (1) copy of the artic	les of incorporation and	a check for:		
\$70.00	Å \$78.75	□ \$78.75	□ \$87.50		
Filing Fee	3	Filing Fee	Filing Fee,		
B	& Certificate of Status	& Certified Copy	Certified Copy		
		12	& Certificate of		
			Status		
		ADDITIONAL CO	PY REQUIRED		
	· · · · · · · · · · · · · · · · · · ·				
FROM:	Alfredo Suarez				
Name (Printed or typed)					
14008 North Blvd.					
Address					
	Tampa, FL 33613				
•	City, State & Zip				
	8/39241439				
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: Lift Care, Inc



ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 14008 North Blvd.
Tampa, FL 33613

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To engage in every aspect of lift services and to invest its funds in real estate, mortgages, stocks bonds and any other type of investment and to own real and personal property necessary for the rendering of the lift services hereby authorized.

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):

President

Alfredo Suarez 14008 North Boulevard Tampa, FL 33613

Secretary/Treasurer
Mary Gagliano
14008 North Boulevard
Tampa, FL 33613

ARTICLE VI REGISTERED AGENT

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

Alfredo Suarez 14008 North Boulevard Tampa, FL 33613

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Alfredo Suarez 14008 North Boulevard Tampa, FL 33613

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

Date

6-17-0 4

Date

6-17-0 4

Date