

PO 4000 100756

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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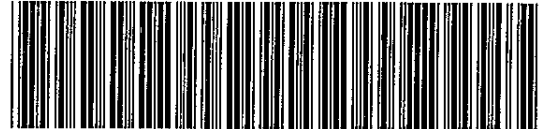
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7/507/04/01

TRANSMITTAL LETTER

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

SUBJECT: Independent Living Home Care Membership Association
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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: James W Chaim St.
Name (Printed or typed)

2477 Stickney Pt Rd #315B
Address

Sarasota FL 34231
City, State & Zip

(941) 924-2764
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: Independent Living home care Membership Association INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 2477 Stichney Pt Rd #315B
Sarasota, FL 34231

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: For providing a discount home health care Services plan where members can get 24 hour or 8 hour care in their own home for on average one-half the normal cost

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es): James W Cram Jr
2477 Stichney Pt Rd #315B
Sarasota, FL 34231.

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is: James W. Cram Jr.
2477 Stichney Point Rd #315
Sarasota FL 34231.

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: James W Cram Jr.
2477 Stichney Pt Rd #315B
Sarasota, FL 34231

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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

6-29-04

Signature/Incorporator

Date

6-29-04