

PO4000013064

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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09/17/04--01014--003 **78.75

04 SEP 17 PM 3:50

V. J. 9/17/04

TRANSMITTAL LETTER

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

SUBJECT: AMERICAN LIBERTY HOME CARE SERVICES COMPANY, 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:

AL ABEL

Name (Printed or typed)

1025 GREENWOOD BOULEVARD, SUITE 121

Address

LAKE MARY, FL 32746

City, State & Zip

800-446-4633

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)

04 SEP 17 PM 3:50

ARTICLE I NAME

The name of the corporation shall be:

AMERICAN LIBERTY HOME CARE SERVICE COMPANY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1025 GREENWOOD BOULEVARD, SUITE 121, LAKE MARY, FL 32746

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO CONDUCT ALL BUSINESS CORPORATIONS ARE PERMITTED TO CONDUCT UNDER FLORIDA LAW INCLUDING WITHOUT LIMITATION THE ARRANGEMENT OF HOME HEALTH CARE SERVICES.

ARTICLE IV SHARES

The number of shares of stock is:

100 NON PAR COMMON

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ALOYSIUS J. ABEL, III LONGWOOD, FL

ALOYSIUS J. ABEL, JR. LAKE MARY, FL

ARTICLE VI REGISTERED AGENT

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

ALOYSIUS J. ABEL, JR.
293 DUBLIN DRIVE
LAKE MARY, FL 32746**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

ALOYSIUS J. ABEL, JR.
293 DUBLIN DRIVE
LAKE MARY, FL 32746

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

Signature/Incorporator

Date