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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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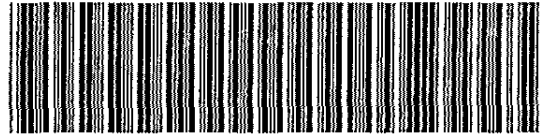
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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12-15

TRANSMITTAL LETTER

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

SUBJECT: RACE HOME HEALTH CARE 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: RAUL DELGADO ESQUIRE

Name (Printed or typed)

10235 SW 8TH., TERRACE,

Address

MIAMI, FLORIDA 33174

City, State & Zip

(305)553-3907

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

RACE HOME HEALTH CARE INC.,

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2015 WEST 62ND., STREET, HIALEAH, FLORIDA 33016

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

HOME HEALTH CARE and any other business activity not in conflict with the laws of the State of Florida and the United States of America

ARTICLE IV SHARES

The number of shares of stock is:

TWO HUNDRED PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

RAMON ALBERTO RODRIGUEZ 2015 W. 62ND., STREET HIALEAH, FLORIDA 33016 PRESIDENT
CARLOS ENRIQUE ORIVE 2015 W 62ND., STREET HIALEAH, FLORIDA 333016 SECRETARY

ARTICLE VI REGISTERED AGENT

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

CARLOS ENRIQUES ORIVE 2015 W 62ND., STREET HIALEAH, FLORIDA 33016

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

RAMON ALBERTO RODRIGUEZ 2015 W 62ND., STREET, HIALEAH, FLORIDA 33016

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

12/10/04

Date



Signature/Incorporator

12/10/04

Date