

765000008661

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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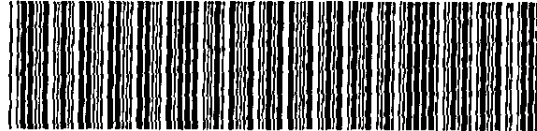
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2005-1096

TRANSMITTAL LETTER

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

SUBJECT: Caregiver Companion USA, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and 2 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:

Angela Day

Name (Printed or typed)

1456 Dunn Cove Dr

Address

Apopka FL 32703

City, State & Zip

(407) 886-1031

Daytime Telephone number

RECEIVED
DIVISION OF CORPORATIONS
JAN 19 1999

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:

Caregiver Companion USA Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1456 Dunn Cove Dr
Apopka FL 32703

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to give quality care to people with ~~disabilities~~ disabilities, and to be supportive ~~and~~ And be able to meet their needs and be a role model in my community.

ARTICLE IV SHARES

The number of shares of stock is:

71

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Angela DAY 1456 Dunn Cove Dr Apopka FL 32703
Charles DAY JR 606 Coral Glen loop Altamonte Springs 32714
Sharnette James 606 Coral Glen loop Altamonte Springs 32714
Emile Edmead 3374 Janet St, Apopka FL 32712

ARTICLE VI REGISTERED AGENT

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

Angela Day
1456 Dunn Cove Dr
Apopka FL 32703

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Angela DAY
1456 Dunn Cove Dr
Apopka FL 32703

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

Angela Day
Signature/Registered Agent

1-3-05
Date

Angela Day
Signature/Incorporator

1-3-05
Date