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05 FEB -7 AM 11: 52

TRANSMITTAL LETTER

Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$87.50 \$70.00 \$78.75 \$78.75 Filing Fee, Filing Fee Filing Fee Filing Fee & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED

Department of State

The Hove of God's Family, Inc.

Name (Printed or typed)

1945 NF 198 Terr.

Address

Miami, FL. 33179

City, State & Zip

1(305) 932-4363

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)	FILED
ARTICLE I NAME	05 FEB -7 AM 11:52
The name of the corporation shall be:	SECRETARY OF STATE
The House of God's Family, Inc.	IALLAHASSEE. FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 1945 NE 198 Tem.	
Migmi FL 33179 ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
to open New business Assisted Living Facility.	
-	
ARTICLE IV SHARES The number of shares of stock is:	
1000	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s): Yolande Florestat - Pres. Vice Pres.	Sec tres.
Aplange Lloueshut - Lies I no Less!	300 1100
Migmi, FL 33179 (yolande F	lorestant will act officers at this time.
ARTICLE VI REGISTERED AGENT	and the second of
The name and Florida street address of the registered agent is:	
1945 NE 1987EM.	
Migmi, FL. 33179	
ARTICLE VII INCORPORATOR	•
The <u>name and address</u> of the Incorporator is:	
Yolande Florestant 1945 NE 198 Terr.	
Migmi, FL. 33179	
*************************	*********
Having been named as registered agent to accept service of process for the above state certificate, I am familiar with and accept the appointment as registered agent and agree	
Signature/Registered Agent	1-23-05 Date
Acele Rosestat	1-23-05
Signature/Incorporator	Date

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