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## TRANSMITTAL LETTER

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

**SUBJECT:** KRATOS INC

(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:**

BARBARA GAYLE

Name (Printed or Typed)

701 SW TULIP BLVD

Address

PORT ST. LUCIE, FL 34954

City, State & Zip

772-878-6586

Daytime Telephone Number

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CLERK OF STATE  
DIVISION OF CORPORATIONS

**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)

**ARTICLES I NAME**

The name of the corporation shall be:

~~KRATOS INC~~ Parah Inc

**ARTICLES II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

701 SW TULIP BLVD, PORT ST. LUCIE, FL 34954

**ARTICLES III PURPOSE**

The character and nature of the business to be transacted by the Corporation shall be to engage in ADULT LIVING FACILITY.

**ARTICLES IV SHARES**

The number of shares of stock is:

ONE THOUSAND (1,000) SHARES

**ARTICLES V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s) and address(es):

BARBARA GAYLE - 701 SW TULIP BLVD, PORT ST. LUCIE, FL 34954

**ARTICLES VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

BARBARA GAYLE - 701 SW TULIP BLVD, PORT ST. LUCIE, FL 34954

**ARTICLES VII INCORPORATOR**

The name and Florida street address of the Incorporator is:

BARBARA GAYLE - 701 SW TULIP BLVD, PORT ST. LUCIE, FL 34954

**ARTICLES VIII EFFECTIVE DATE:**

The effective date of the corporation shall be JUNE 1<sup>ST</sup>, 2005

\*\*\*\*\*

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.

+ Barbara Gayle B Gayle

SIGNATURE/REGISTERED AGENT  
BARBARA GAYLE

5/26/05  
DATE

x 5/26/05 B Gayle

SIGNATURE/INCORPORATOR  
BARBARA GAYLE

5/26/05  
DATE

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