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TALLAHASSEE, FLORIDA

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**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. SINCERE HOME HEALTH CARE, INC.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

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**NEW FILINGS**

- ☒ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

**Examiner's Initials**

ARTICLES OF INCORPORATION  
OF  
SINCERE HOME HEALTH CARE, INC.

FILED  
05 NOV -2 PM 1:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:  
SINCERE HOME HEALTH CARE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

950 N. KROME AVENUE SUITE 404  
HOMESTEAD, FL 33030

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 AT NO PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name of the initial registered agent is :

LIVAN GONZALEZ  
1431 N.E. 11<sup>TH</sup> ST  
HOMESTEAD, FL 33030

**ARTICLE V INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

LIVAN GONZALEZ  
1431 N.E. 11<sup>TH</sup> ST  
HOMESTEAD, FL 33030

**PRESIDENT**

LIVAN GONZALEZ  
1431 N.E. 11<sup>TH</sup> ST  
HOMESTEAD, FL 33030

**VICE-PRESIDENT**

SELENA ARP  
1431 N.E. 11<sup>TH</sup> ST  
HOMESTEAD, FL 33030

**TREASURER**

The undersigned incorporator(s) has(have) executed these Articles of Incorporation

this 23 Day of SEPTEMBER 2005.

LIVAN GONZALEZ  
Signature

Selena Arp  
Signature

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501,  
FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED  
UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE  
FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED  
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

**SINCERE HOME HEALTH CARE, INC.**

2. The name and address of the registered agent and office is:

LIVAN GONZALEZ  
1431 N.E. 11<sup>TH</sup> ST  
HOMESTEAD, FL 33030

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

LIVAN GONZALEZ  
Signature

1431 NE 11ST  
HOMESTEAD FL  
33030

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