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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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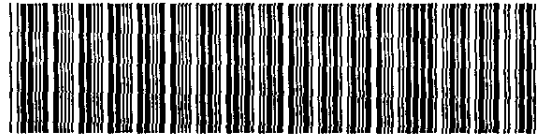
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MAR 6 2006

COVER LETTER

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

SUBJECT: Broome Support Coordination Services, 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: Isabel Broome
Name (Printed or typed)

1821 Black Lk Blvd
Address

Winter Garden, FL 34787
City, State & Zip

407-346-6385
Daytime Telephone number

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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:

Broome Support Coordination Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1821 BLACK LK BLVD WINTER GARDEN, FL 34787

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide Waiver Support Services

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Isabel Broome, President
1821 BLACK LK BLVD
WINTER GARDEN, FL 34787

ARTICLE VI REGISTERED AGENT

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

1821 BLACK LK BLVD
WINTER GARDEN, FL 34787

Isabel Broome

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Isabel Broome
1821 BLACK LK BLVD WINTER GARDEN, FL 34787

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

Isabel Broome
Signature/Registered Agent

2/28/06
Date

Isabel Broome
Signature/Incorporator

2/28/06
Date