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(Requestor's Name)

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(Address)

\_\_\_\_\_  
(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

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\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05/08/06--01023--012 \*\*87.50

06 MAY -8 PM 3:58

## TRANSMITTAL LETTER

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

SUBJECT: Companion Home Care Services of the Palm Beaches, 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: Sharon M. Peart - Crenshaw  
Name (Printed or typed)

2519 Canterbury Drive North  
Address

West Palm Beach, FL 33407  
City, State & Zip

(561) 841-4984 / (561) 841-4984  
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)

### ARTICLE I NAME

The name of the corporation shall be:

Companion Home Care Services  
of The Palm Beaches, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2519 Canterbury Drive North  
West Palm Beach, FL 33407

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Home Health Care

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### ARTICLE IV SHARES

The number of shares of stock is:

100

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Sharon M. Peart-Crenshaw  
Oscar F. Crenshaw  
2519 Canterbury Drive N  
West Palm Beach, FL 33407  
Vice President  
President

### ARTICLE VI REGISTERED AGENT

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

Sharon M. Peart-Crenshaw  
2519 Canterbury Drive North  
West Palm Beach, FL 33407

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Oscar F. Crenshaw  
2519 Canterbury Drive North  
West Palm Beach, FL 33407

\*\*\*\*\*

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

Sharon M. Peart-Crenshaw

Signature/Registered Agent

Oscar F. Crenshaw

Signature/Incorporator

5/03/06  
Date

5/03/06  
Date