

P06000067596

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

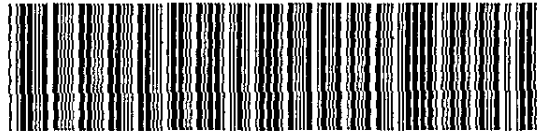
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600074175996

05/12/06--01030--011 **78.75

RECEIVED
SECRETARY
DIVISION
06 MAY 12 PM 4:54

COVER LETTER

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

SUBJECT: Home of LUV, 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: Gertrude Smith
Name (Printed or typed)

13175 Doubletree circle
Address

Wellington, FL 33179
City, State & Zip

561-541-7732 / 754-423-5739
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
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME

The name of the corporation shall be:

Home of LUV, Inc 06 MAY 12 PM 4:54

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

13175 Doubletree circle Wellington, Fl 33414

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Elderly Care Home Services

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):

President: Gertrude Smith
Vice President: Shermet Smith

13175 Doubletree circle
Wellington, Fl 33414

ARTICLE VI REGISTERED AGENT

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

President: Gertrude Smith

13175 Doubletree circle
Wellington, Fl 33414

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Gertrude Smith
13175 Doubletree circle
Wellington, Fl 33414

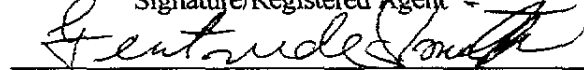
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

4-28-06

Date



Signature/Incorporator

4-28-06

Date