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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

144

## COVER LETTER

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

SUBJECT: Sunflower Senior Living, 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: Marguerite Sankarlall  
Name (Printed or typed)

6931 NW 81<sup>st</sup> Court.  
Address

Tamarac FL 33321.  
City, State & Zip

754-235-2666.  
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:

Sunflower Senior living, Inc

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

6931 NW 81<sup>st</sup> Court  
Tamarac FL 33321.

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Starting a new business

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Marguerite Sankarlall P, V P, T, S  
6931 NW 81<sup>st</sup> Ct.  
Tamarac FL 33321

**ARTICLE VI REGISTERED AGENT**

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

Marguerite Sankarlall  
6931 NW 81<sup>st</sup> Court  
Tamarac FL 33321.

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Marguerite Sankarlall  
6931 NW 81<sup>st</sup> Court  
Tamarac FL 33321.

\*\*\*\*\*

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

Marguerite Sankarlall  
\_\_\_\_\_  
Signature/Registered Agent

Marguerite Sankarlall  
\_\_\_\_\_  
Signature/Incorporator

5/24/06

Date

5/24/06

Date

06 MAY 30 AM 11:54  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED