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Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Document #) (Corporation Name) Pick up time 2-06 Certified Copy Walk in Photocopy Certificate of Status Mail out Will wait <u>AMENDMENTS</u> **NEW FILINGS** -Profit Amendment Resignation of R.A., Officer/Director Not for Profit Change of Registered Agent Limited Liability Domestication . . . ☐ Dissolution/Withdrawal Merger Other REGISTRATION/QUALIFICATION **OTHER FILINGS** Foreign Annual Report Limited Partnership Fictitious Name Reinstatement Trademark

Other

Examiner's Initials

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ARTICLES OF INCORPORATION

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.

<u>ARTICLE I – NAME</u>

The name of the corporation shall be:

Never Alone Senior Care, Inc



ARTICLE II - PRINCIPAL OFFICE

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

925 Hunting Lodge Dr. Miamispring, FL 33166

ARTICLE III - SHARES

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

100

ARTICLES IV-INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

925 Hunting Lodge Dr. Miami Spring, FL 33166 Joaquin Hernandez

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

Joaquin Hernandez 925 Hunting Lodge Dr. Miamispring, FL 33166

Signature 1+1

The undersigned incorporator has executed these Articles of Incorporation this 23 day of May 2006

ARTICLE VI - DIRECTOR(S)

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

Joaquin Hernandez (President)

925 Honting Lodge Or.

Miamisprins, FL 33166.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature.