

PD6000077168

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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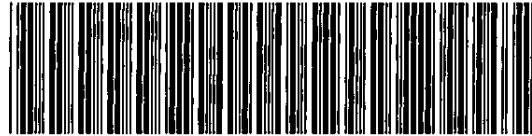
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/02/06--01032--006 **78.75

MRB
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FILED
06 JUN -2 AM 8:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Louvic Care, 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: VICTORIA D. FERNANDEZ
Name (Printed or typed)

515 WEST PARK DRIVE #5
Address

MIAMI FL 33172
City, State & Zip

305-498-5798
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:

Louvic CARE, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

515 WEST PARK DRIVE #5
MIAMI, FL. 33172

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

HOME CARE SERVICES
SALES WHOLESALE & RETAIL & REMODELING

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):

VICTORIA D. FERNANDEZ - 50%
PRESIDENT
515 WEST PARK DRIVE #5
MIAMI, FL. 33172

ESTHER LUIS - 50%
VICE PRESIDENT
20130 S.W. 106 AVE
MIAMI, FL. 33189

ARTICLE VI REGISTERED AGENT

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

VICTORIA D. FERNANDEZ
515 WEST PARK DR. #5
MIAMI, FL. 33172

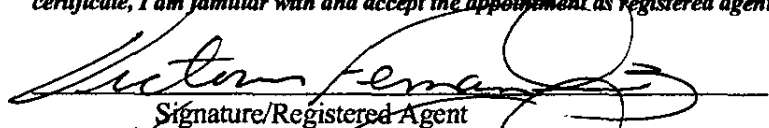
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

VICTORIA O. FERNANDEZ
515 WEST PARK DR. #5
MIAMI, FL. 33172

ESTHER LUIS
20130 S.W. 106TH AVE
MIAMI, FL. 33189

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


Signature/Incorporator

Esther Luis

5-26-06

Date

5-26-06

Date

5-26-06

FILED

06 JUN -2 AM 8:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA