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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

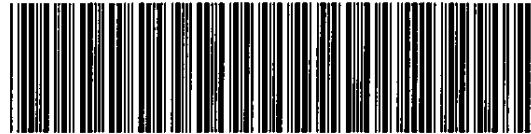
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: HEAVEN ON EARTH ASSISTED 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: Rosalee V. Escoffery
Name (Printed or typed)

7752 Alhambra Blvd
Address

Miramar, FL 33023
City, State & Zip

954-295-0079
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

Heaven ON Earth Assisted Living Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7661 Hood Street
Hollywood, FL 33024
7752 Alhambra Blvd
Miramar, FL 33023

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Social Services

ARTICLE IV SHARES

The number of shares of stock is:

100 Shares at \$10.00 per share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Rosalee V. Escoffery (OWNER)
7752 Alhambra Blvd, Miramar, FL 33023

ARTICLE VI REGISTERED AGENT

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

Rosalee V. Escoffery
7752 Alhambra Blvd, Miramar, FL 33023

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Rosalee V. Escoffery
7752 Alhambra Blvd, Miramar, FL 33023

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

Date

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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