

P070 00010339

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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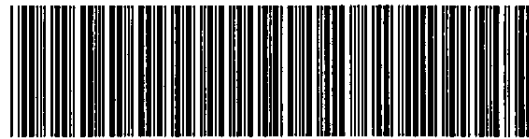
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers
5422-60m
66-52327
5422-60m
66-50775
66-48771
JAN 24 2007

COVER LETTER

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

SUBJECT: Life Management Systems

(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: Mrs. Cynthia L. Johnson

Name (Printed or typed)

14520 Tyler Street

Address

Miami, Florida 33176

City, State & Zip

(786)282-1682

Daytime Telephone number

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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:

~~Life Management Systems CORPORATION~~

SOLUTIONS FOR LIFE MANAGEMENT SYSTEMS CORPORATION

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

14520 Tyler Street
Miami, Florida 33176

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To become a Medicaid Provider as a Case Manager

ARTICLE IV SHARES

The number of shares of stock is:

~~Zero (0)~~ ONE (1)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Mrs. Cynthia L. Johnson, Director/Owner : 14520 Tyler Street Miami, Fl. 33176

Mrs. Cynthia L. Johnson, President : 14520 Tyler Street Miami, Fl. 33176

ARTICLE VI REGISTERED AGENT

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

Mrs. Cynthia L. Johnson
14520 Tyler Street
Miami, Fl. 33176

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Mrs. Cynthia L. Johnson
14520 Tyler Street
Miami, Fl. 33176

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

Mrs. Cynthia L. Johnson
Signature/Registered Agent

11/03/2006

Date

Mrs. Cynthia L. Johnson
Signature/Incorporator

11/03/2006

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA