

PO7000037582

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

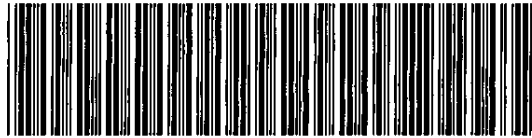
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07 MAR 23 AM 11:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers MAR 26 2007

W07-12984

COVER LETTER

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

SUBJECT: Devoted 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: MARGARET MOFFITT
Name (Printed or typed)

3901 Ponce De Leon Blvd
Address

Sebring, FL 33872
City, State & Zip

863-253-1067
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 MAR 23 AM 11:44

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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:

Devoted Care Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3901 Ponce De Leon Blvd
Sebring, Fl 33872

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Homemaker and companion services

ARTICLE IV SHARES

The number of shares of stock is:

50

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MARGARET MOFFITT OFFICER / DIRECTOR
3901 Ponce De Leon Blvd
Sebring, Fl 33872

ARTICLE VI REGISTERED AGENT

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

MARGARET MOFFITT
3901 Ponce De Leon Blvd
Sebring, Fl 33872

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARGARET MOFFITT
3901 Ponce De Leon Blvd
Sebring, Fl 33872

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

Margaret Moffitt
Signature/Registered Agent

03/20/07
Date

Margaret Moffitt
Signature/Incorporator

03/20/07
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA