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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

ARTICLE I - NAME

The name of the corporation shall be:

MY KIND HOME ALF, INC.

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

1846 S.W 22 Terra, Miani, F1, 33145

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:

HAYREN SARDINAS 1165 W 33 ST HPAJEAH, FI, 33012.

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SECRETARY UF STATE
TALLAHASSEE, FLORIDA

ARTICLE V - INCORPORATOR

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

MAYREN SARDONAS 1165 W 33 ST HOAJEAH, FI, 33012.

The undersigned incorporator has executed these Articles of Incorporation this OS day of APP^{O} , 2007

الطيم. :

ARTICLE VI- DIRECTOR(S)

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

MAYREN SARDPUAS 1165 W 33 ST HPALEAH, Pl, 33012.

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