

COVER LETTER

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

SUBJECT: CARING FOLKS, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: C. SANDERS

Name (Printed or typed)

5420 SW 104 TERRACE

Address

COOPER CITY, FLORIDA

City, State & Zip

954-534-6878

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:

CARING FOLKS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5420 SW 104 AVENUE
COOPER CITY, FL 33328

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

BUSINESS MANAGEMENT

ARTICLE IV SHARES

The number of shares of stock is:

75,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

C. SANDERS - P.O. BOX 491504, FT.
LAUDERDALE, FL. 33349

K. JOHNSON - 5396 NW 126 DRIVE, CORAL
SPRINGS, FLORIDA 33076

T. SANDERS - 5396 NW 126 DRIVE,
CORAL SPRINGS, FLORIDA 33076

FILED
2007 DEC 31 A 10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

C. SANDERS - P.O. BOX 491504, FT. LAUDERDALE, FL. 33349

5396 NW 126 Dr.
Coral Springs, Fl. 33074

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

C. SANDERS - P.O. BOX 491504, FT. LAUDERDALE, FL. 33349

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

Date

Signature/Incorporator

Date

Register Agent