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SECRETARY OF STATE ALLAHASSEF. FI ORION

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COVER LETTER

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

SUBJECT: CAF	RING FOLKS, INC.		
•	(PROPOSED CORPORAT	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an ori	iginal and one (1) copy of the artic	cles 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
		ADDITIONAL CO	Status PPY REQUIRED
\	·		
FROM:	C. SANDERS		
	Name (Printed or typed)	
	5420 SW 104 TERRAC	E	
	A	ddress	
	COOPER CITY, FLOR		
	City, 9	State & Zip	
	954-534-6878		
	Daytime Te	lephone 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/mailing 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

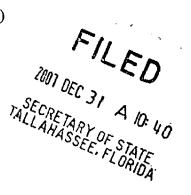
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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



The name and Florida street address (P.O. Box NOT acceptable) of the register	ered agent is:
C. SANDERS - P.O. BOX 491504, FT. LAUDERDALE, FL. 33349	
5396 NW 136 Dr. Coral Spring fl. 33076 ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
C. SANDERS - P.O. BOX 491504, FT. LAUDERDALE, FL. 33349	
**************************************	n this capacity
Signature/Registered Agent	Date
Signature/Incorporator/Register Agent	Date

ARTICLE VI