

798088023499

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

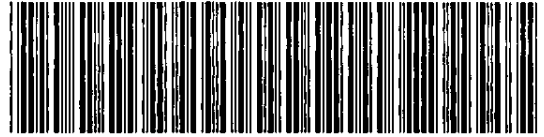
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

3-5-08  
200

## COVER LETTER

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

SUBJECT: Priority 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: India Scott  
Name (Printed or typed)

1601 Wake Lane Gulf Breeze  
Address

Gulf Breeze FL 32563  
City, State & Zip

850-910-4676  
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:

Priority Care Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1601 Wake Lane  
Gulf Breeze, Fl. 32563

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of this corporation is for India Scott  
Advanced Registered Nurse Practitioner to provide care to the elderly in  
Nursing Homes.

### ARTICLE IV SHARES

The number of shares of stock is:

ten

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

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**ARTICLE VI REGISTERED AGENT**

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

India Scott A.R.N.P.  
1601 Wake Lane  
Gulf Breeze, FL 32503

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

India Scott A.R.N.P.  
1601 Wake Lane  
Gulf Breeze, FL 32503

\*\*\*\*\*

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

India R Scott A.R.N.P.  
\_\_\_\_\_  
Signature/Registered Agent

2-29-08  
\_\_\_\_\_  
Date

India R Scott A.R.N.P.  
\_\_\_\_\_  
Signature/Incorporator

2-29-08  
\_\_\_\_\_  
Date

India R Scott A.R.N.P.

2-29-08