

PD8000024010

(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

COVER LETTER

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

SUBJECT: ETIENNE 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: SANDY ETIENNE

Name (Printed or typed)

3338 NW 85 AVENUE

Address

CORAL SPRINGS, FL 33065

City, State & Zip

(954) 658-8485

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:

ETIENNE CARE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3338 NW 85 AVENUE
CORAL SPRINGS, FL 33065

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO CONDUCT ALL LEGAL BUSINESS IN THE STATE

ARTICLE IV SHARES

The number of shares of stock is:

ONE HUNDRED

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

SANDY ETIENNE -
PRESIDENT, TREASURER, SECRETARY
3338 NW 85 AVENUE, CORAL SPRINGS
FLORIDA 33065

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TALLAHASSEE, FLORIDA**

FILED

ARTICLE VI REGISTERED AGENT

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

SANDY ETIENNE
3338 NW 85 AVENUE, CORAL SPRINGS FLORIDA 33065

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

SANDY ETIENNE
3338 NW 85 AVENUE, CORAL SPRINGS FLORIDA 33065

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

Sandy Etienne
Signature/Registered Agent

2/27/08
Date

Sandy Etienne
Signature/Incorporator

2/27/08
Date