

P08000030449

(Requestor's Name)

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☐ PICK-UP ☐ WAIT ☐ MAIL

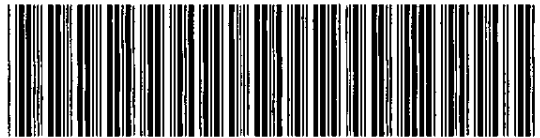
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03-24-08
W08-12113
A.H.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

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2008 MAR 24 PM 12:44
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TALLAHASSEE, FLORIDA

March 7, 2008

SERGIO E. SIGLER
13193 SW 191 TER
MIAMI, FL 33177

SUBJECT: THE BEST CARE SERVICE, INC.
Ref. Number: W08000012113

We have received your document for THE BEST CARE SERVICE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not serve as its own registered agent. Please designate the individual whose typed signature appears on the registered agent signature line.

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6993.

Annie Hall
Regulatory Specialist II
New Filing Section

Letter Number: 908A00014281

COVER LETTER

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

FILED
2008 MAR 24 PM 12:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: The Best Care Service, 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: SERGIO E. SIGLER

Name (Printed or typed)

13193 SW 191 TER

Address

Miami, FL 33177

City, State & Zip

786-283-3344 OR 786-343-8303

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

The Best Care Service, INC.

ARTICLE II PRINCIPAL OFFICE

The principle street address and mailing address, if different is:

13193 SW 191 TER
Miami, FL 33177

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Homemaking and Companion

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Sergio E. Sigler
13193 SW 191 TER
Miami, FL 33177

ARTICLE VI REGISTERED AGENT

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

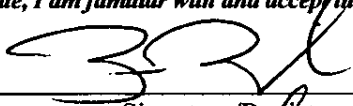
Sergio E. Sigler
13193 SW 191 TER
Miami FL 33177

ARTICLE VII INCORPORATOR

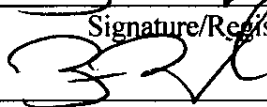
The name and address of the Incorporator is:

SERGIO E. SIGLER
13193 SW 191 Terr.
Miami, FL 33177

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



Signature/Incorporator

3/18/08

Date

3/18/08

Date