

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000089854 3)))



H080000898543ABC8

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : JOAN HAMILTON, P.A.
Account Number : I20040000006
Phone : (954) 565-9173
Fax Number : (954) 565-3283

RECEIVED APR - 9 2008

08 APR - 9 AM 11:21

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

FLORIDA PROFIT/NON PROFIT CORPORATION

HOME HEALTH CARE BY TONY

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$87.50

Electronic Filing Menu

Corporate Filing Menu

Help

<https://efile.sunbiz.org/scripts/efilcovr.exe>

4/10/08

3

4/8/2008

H080000898543

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

08 APR -9 AM 11:21

ARTICLE I NAME

The name of the corporation shall be:

HOME HEALTH CARE BY TONY, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

509 NW 53rd St
BOCA RATON FL - 33487

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER
THE LAWS OF THE UNITED STATES & THE STATE OF FLORIDA

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES @ \$1.00 PER SHARE

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Anthony Bummara
509 NW 53rd St
BOCA RATON FL - 33487

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Anthony Bummara
509 NW 53rd St
BOCA RATON FL - 33487

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Anthony Bummara
509 NW 53rd St
BOCA RATON FL - 33487

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

Anthony Bummara
Signature/Registered Agent

4-9-08
Date

Anthony Bummara
Signature/Incorporator

4-9-08
Date

⑦

H080000898543