

POB000041028

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

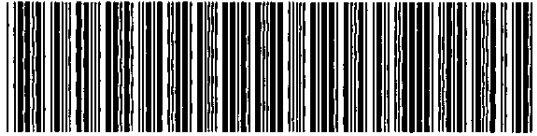
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2008 APR 23 PM 4: 27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch APR 23 2008

## COVER LETTER

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

**SUBJECT:** LIKE FAMILY 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

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

**FROM:** SHANKEISHE THOMPSON

Name (Printed or typed)

3081 NW 77 ST

Address

MIAMI, FL 33147

City, State & Zip

305 -801-8761

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:

LIKE FAMILY INC

### ARTICLE II PRINCIPAL OFFICE

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

4715 NW 157 STREET SUITE 201 MIAMI, FL 33014

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

HOME CARE

### ARTICLE IV SHARES

The number of shares of stock is:

1000

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

SHANKEISHE THOMPSON, PRESIDENT 3801 NW77 STREET MIAMI, FL 33147

SHULER EVINS, VICE PRESIDENT 3801 NW 77 STREET MIAMI, FL 33147

GAIL EVINS, SEC 3801 NW 77 STREET MIAMI, FL 33147

### ARTICLE VI REGISTERED AGENT

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

GAIL EVINS 3801 NW 77 STREET MIAMI, FL 33147

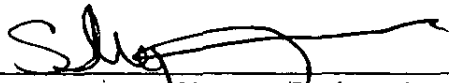
### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SHANKEISHA THOMPSON 3801 NW77 ST MIAMI, FL 33147

\*\*\*\*\*

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 GAIL EVINS

3-26-08

Date



Signature/Incorporator SHANKEISHA THOMPSON

3-26-08

Date