

Division of Corporations

Page 1 of 1

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.

(((H08000113066 3)))



H080001130663ABCZ

**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

RECEIVED APR 28 2008

From:  
Account Name : HUBCO  
Account Number : 104662003400  
Phone : (516) 935-3940  
Fax Number : (516) 935-3088

## FLORIDA PROFIT/NON PROFIT CORPORATION

24/7 Comfort Care Inc

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

08 APR 28 AM 10:48

APPROVED  
AND  
FILED

H08000113066

## ARTICLES OF INCORPORATION

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

### ARTICLE I NAME

The name of the corporation shall be:

**24/7 Comfort Care Inc**

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

**24/7 Comfort Care Inc  
3018 Alcazar Place, Unit 105  
Palm Beach Gardens, FL 33410**

08 APR 28 AM 10:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

**1,500 Shares at No Par Value**

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Emmanuel Servillas  
21522 Cavandish Road  
Boca Raton, FL 33433**

**Prepared By:  
Bruce B. Hubbard  
77 East John St.  
Hicksville, New York 11801  
1-516-635-3940**

H08000113066

H08000113066

**ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)**

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

**Lady Michelle Jones - President/Director  
3018 Alcazar Place, Unit 105  
Palm Beach Gardens, FL 33410**

**ARTICLES VI INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

**Lady Michelle Jones  
3018 Alcazar Place, Unit 105  
Palm Beach Gardens, FL 33410**

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

24th day of April 2008.

  
\_\_\_\_\_  
Lady Michelle Jones - Signature

H08000113066

H08000113066

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE  
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF  
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE  
REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: 24/7 Comfort Care Inc

2. The name and address of the registered agent and office is:

Emmanuel Servillas

Name

21522 Cavandish Road

(P.O. Box or Mail Drop Box NOT Acceptable)

Boca Raton, FL 33433


(City / State / Zip)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

08 APR 28 AM 10:48

APPROVED  
AND  
FILED

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.*



Emmanuel Servillas  
SIGNATURE

April 24, 2008

(Date)

H08000113066