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| Certified Copies   | Certificates      | of Status |
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| Special Instructions to  | Filing Officer:   |           |
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Office Use Only



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SEURETARY OF STATE

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## **COVER LETTER**

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

| SUBJECT: MOD         | ERN CARE NURSING INC. (PROPOSED CORPORA  | TE NAME – <u>MUST INC</u> L                        | UDE SUFFIX)   |
|----------------------|--|--|---|
| Enclosed are an orig | inal and one (1) copy of the artic       | cles of incorporation and                          | a check for:  |
| \$70.00 Filing Fee   | \$78.75                                  | \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate o Status |
| FROM: SA             | NDRA HENRY/ ARLENE HENRY<br>Name         | (Printed or typed)                                 |   |
|                      | 144 SE 31 AVE                            | Address  | · · · · · · · · · · · · · · · · · · ·                     |
|                      | BOYNTON BEACH, FLORIDA 3 City,           | 3435<br>State & Zip                                |   |
|                      | 954 30907660 / 561 577 3589<br>Daytime T | elephone number                                    | <del>,,,,,,</del>   |

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:

MODERN CARE NURSING INC.

# OB JUN 19 PM 1:27 SECRETARY OF STATE FALLAHASSEE, FLORIDA

### ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is:

144 SE 31 AVE BOYNTON BEACH, FL. 33435

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE CARE AND ROUTINE ACTIVITIES FOR THE ELDERLY HANDICAPPED AND CONVALESCENT INDIVIDUALS.

### ARTICLE IV SHARES

The number of shares of stock is:

TWO (2)

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARLENE HENRY 144 SE 31 AVE

**BOYNTON BEACH, FL 33435** 

**PRESIDENT** 

SANDRA HENRY 6945 SW 4TH STREET

MARGATE, FL. 33068

DIRECTOR

### ARTICLE VI REGISTERED AGENT

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

JULIAN HENRY 6945 SW 4TH STREET MARGATE, FL. 33068

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SANDRA HENRY 6945 SW 4TH STREET MARGATE, FL. 33068

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

OGIDADE

Signature/Incorporator)

Signature/Registered Agent

06/02/08

Date