

PD8000065525

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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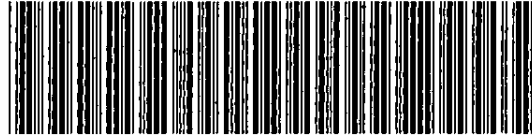
(Business Entity Name)

(Document Number)

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

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2008 JUL 10 P 12:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUL 10 2008  
D.A. WHITE

## COVER LETTER

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

**SUBJECT:** Loving Care Health Services 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:** Michelle Carter-Page

Name (Printed or typed)

1269 Rose Gate Boulevard

Address

Riviera Beach Florida 33404

City, State & Zip

561-588-9204

Daytime Telephone number

**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)

**FILED**

**ARTICLE I NAME**

The name of the corporation shall be:

Loving Care Health Services Inc

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

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

1269 Rose Gate Boulevard  
Riviera Beach Florida 33404

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Health Care Services

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Michelle Carter-Page  
1269 Rose Gate Boulevard  
Riviera Beach, Florida 33404 (President)  
Windell Page  
1269 Rose Gate Boulevard  
Riviera Beach, Florida 33404 (Secretary)

**ARTICLE VI REGISTERED AGENT**

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

Easemera E Brown-Augustus  
7395 Willow Springs Circle E  
Boynton Beach, Florida 33436

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Easemera E Brown-Augustus  
7395 Willow Springs Circle E  
Boynton Beach, Florida 33404

\*\*\*\*\*

*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*

Easemera E Brown-Augustus  
Signature/Registered Agent

7/7/08  
Date

Easemera E Brown-Augustus  
Signature/Incorporator

7/7/08  
Date