

P080000073651

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

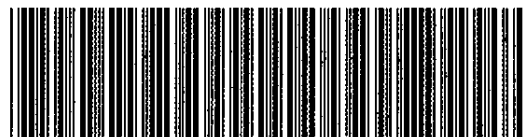
☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____



800133855318

08/05/08--01024--004 **87.50

Special Instructions to Filing Officer: *Call and spoke with Rev. Olivia Hannibal on 8/6/08. it was OK to correct Article IV and Article V on share and title.*

Office Use Only

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 AUG -5 AM 11:39

EP 8/6/08

COVER LETTER

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

SUBJECT: BEST CARE of GAINESVILLE
(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: Ms. Retha Carswell
Name (Printed or typed)

3001 NE 14th Street
Address

Gainesville, FL 32609
City, State & Zip

352-372-7359
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)

ARTICLE I NAME

The name of the corporation shall be:

BEST CARE OF GAINESVILLE, INC.

ARTICLE II PRINCIPAL OFFICE

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

1811 SE 13th PLACE Gainesville, FL 32641
P. O. BOX 344 Gainesville, FL 32641

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Assisted Living Home

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

CEO/Director: Ms. Retha Carswell 3001 NE 14th Street Gainesville, FL 32609
Asst. Director: Rev. Olivia Hannibal 1504 SE 12th Place Gainesville, FL 32641
~~Chaplain~~ Mr. James Hannible 1504 SE 12th Place Gainesville, FL 32641
priest

ARTICLE VI REGISTERED AGENT

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

Ms. Retha Carswell 3001 NE 14th Street Gainesville, FL 32609

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Rev. Olivia Hannibal 1504 SE 12th Place Gainesville, FL 32641

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

Ms. Retha Carswell

Signature/Registered Agent Ms. Retha Carswell

1 August 2008

Date

Rev. Olivia Hannibal

Signature/Incorporator REV. OLIVIA HANNIBAL

1 August 2008

Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 AUG -5 AM 11:39