

PD8000081027

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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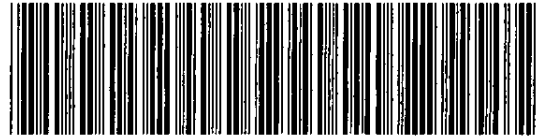
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRP
9/3

COVER LETTER

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

SUBJECT: Americare Capital Management, 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: Americare Capital Management, Inc.

Name (Printed or typed)

20 N.W. 181st Street

Address

Miami, FL 33169

City, State & Zip

(305) 770-1141

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

ARTICLE I NAME

The name of the corporation shall be:

Americare Capital Management, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

**20 N.W. 181st Street
Miami, FL 33169**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This entity will manage the cash positions of the Foundations which it represents and individuals who are participants in the foundations and or any allied entities. We will attempt to maximize any purchase in which capital is expended for members herein referenced. If necessary, it will acquire all ownership or the services of a stock brokerage firm which provides all of these services required in financial management.

ARTICLE IV SHARES

The number of shares of stock is:

One Hundred Thousand (100,000) shares.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

**Joseph P. D'Angelo, President and Director
400 Poinciana Dr.
Hallandale, FL 33009**

**Margaret Heichberger, Secretary and Director
400 Poinciana Dr.
Hallandale, FL 33009**

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TALLAHASSEE, FLORIDA**

ARTICLE VI REGISTERED AGENT

The name and address of the registered agent is:

**Joseph P. D'Angelo
400 Poinciana Drive
Hallandale, FL 33009**


ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

**Joseph P. D'Angelo
400 Poinciana Dr.
Hallandale, FL 33009**

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TALLAHASSEE, FLORIDA


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

8/21/08

Date



Signature/Incorporator

8/21/08

Date