P08000092168

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Stat	us
Special Instructions to Filing Officer:	

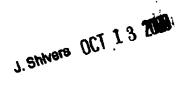
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COVER LETTER

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

BJECT: CONNE	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
losed are an orig	ginal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	☑ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: Pa	aul Silverstein		
	Name	e (Printed or typed)	ACC
	4441 SW 62 Ct.	A I I	And C
		Address	\$\$E.7
	Miami, Fl. 33155		
	City	y, State & Zip	M 10: 50
	305-794-9773		50
		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:

CONNECTCARE, INC

PRINCIPAL OFFICE ARTICLE II

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

SW 62 4 SAME 4441 33155 Miami fl

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any legal business.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Paul Silverstein, President/Director 4441 SW 62 Ct. Miami, Fl. 33155 Robert Silverstein, Vice President/Director 8000 St. Miami, Fl. 33158

REGISTERED AGENT

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

Paul Silverstein 4441 SW 62 Ct. Miami, Fl. 33155

INCORPORATOR ARTICLE VII

The name and address of the Incorporator is:

Paul Silverstein 4441 SW 62 Ct. Miami, Fl. 33155

> 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

/o-8:08

Date

/o-8-08

Date

Signature/Registered Agent

ignature/Incorporator