

P08000092266

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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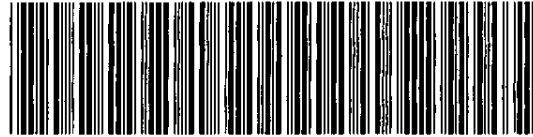
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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ST. JOHNS COUNTY
TALLAHASSEE, FLORIDA

74

COVER LETTER

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

SUBJECT: Divine Care Services Pool, 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: Ishtiaq Jinnah
Name (Printed or typed)

5190 NW 167 Street, Suite 211
Address

Miami Gardens, FL 33014
City, State & Zip

Office: (305) 430-9520 / Fax: (305) 430-9521
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:

Divine Care Services Pool, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Business & Mailing Address: 5190 NW 167 Street, Suite 211 Miami Gardens, FL 33014

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The power to engage in any and all lawful aspects of business.

ARTICLE IV SHARES

The number of shares of stock is:

100 shares, per value \$.01 per share, all of which will be common shares.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Ishtiaq Jinnah-President 50%

Barbara Servia-Vice President 50%

5190 NW 167 Street, Suite 211

5190 NW 167 Street, Suite 211

Miami Gardens, FL 33014

Miami Gardens, FL 33014

ARTICLE VI REGISTERED AGENT

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

Ishtiaq Jinnah

5190 NW 167 Street, Suite 211

Miami Gardens, FL 33014

ARTICLE VII INCORPORATOR

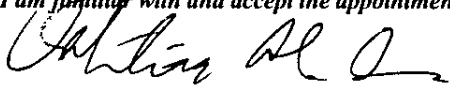
The name and address of the Incorporator is:

Ishtiaq Jinnah

5190 NW 167 Street, Suite 211

Miami Gardens, FL 33014

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



Signature/Incorporator

10/07/08
Date

10/07/08
Date

FILED
08 OCT 10 AM 4:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA