

P08000102680

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

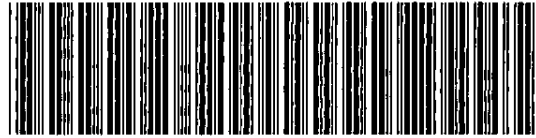
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF SUPERIOR COURT
JANESVILLE, WI

DA

COVER LETTER

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

SUBJECT: Reliable Health 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Tatyana Kogan
Name (Printed or typed)

10187 Serene Meadow Drive N
Address

Boca Raton, Florida 33428
City, State & Zip

954-401-4015
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:

Reliable Health Care Services Pool, Inc

ARTICLE II PRINCIPAL OFFICE

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

21050 Windemere Lane
Boca Raton, Florida 33428

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Hospital/Medical Facility Staffing 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):

Irina Gleyzer - Director
21050 Windemere Lane
Boca Raton, Florida 33428

ARTICLE VI REGISTERED AGENT

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

Irin Mikahilenkov
10134 182nd Lane S
Boca Raton, Florida 33498

ARTICLE VII INCORPORATOR

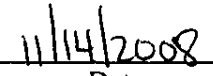
The name and address of the Incorporator is:

Tatyana Kogan
10187 Serene Meadow Drive N
Boca Raton, Florida 33428

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



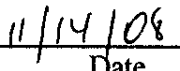
Signature/Registered Agent



Date



Signature/Incorporator



Date

SECRETARY OF STATE
FLORIDA
101 MASSENA, 33401

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE VIII EFFECTIVE DATE OF INCORPORATION

The **effective date** of the Corporation will be:

November 17, 2008

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA