P09000043502

_____
(Requestor's Name)

_____
(Address)

_____
(Address)

_____
(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
(Business Entity Name)

_____
(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

EP 5/18/09

TRANSMITTAL LETTER

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

SUBJECT: __CLARK ADULT CARE INC__
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is 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:

__JUANITA C CLARK__
Name (Printed or typed)

__4465 N APPLEGATE TERR__
Address

__CRYSTAL RIVER, FL 34428__
City, State & Zip

__352- 302- 6903__
Daytime Telephone number
352-563-1873

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:

CLARK ADULT CARE INC

ARTICLE II   PRINCIPAL OFFICE
The principal place of business/mailing address is:

4465 N APPLEGATE TERR
CRYSTAL RIVER FL 34428

ARTICLE III   PURPOSE
The purpose for which the corporation is organized is:

NEW BUSINESS

ARTICLE IV   SHARES
The number of shares of stock is:

100

ARTICLE V   INITIAL OFFICERS/DIRECTORS (optional)
The name(s), address(es) and title(s):

JUANITA CLARK
4465 N APPLEGATE TERR
CRYSTAL RIVER, FL 34428
PRESIDENT

HENRY CLARK
4465 N APPLEGATE
TERR
CRYSTAL RIVER FC
34428
VICE PRESIDENT

ARTICLE VI   REGISTERED AGENT
The **name and Florida street address** of the registered agent is:

RITA WECKESSER
10 N Melbourne
Beverly Hills FL 34465

ARTICLE VII   INCORPORATOR
The **name and address** of the Incorporator is:

JUANITA CLARK
4465 N APPLEGATE TERR CRYSTAL RIVER FL

****

*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

5-13-09
Date

Signature/Incorporator

5-13-09
Date