

PO9000059710

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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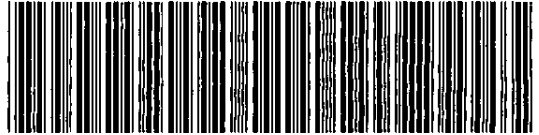
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2009 JUL 13 PM 4:30

7/14/09

COVER LETTER

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

SUBJECT: QUALITY LIFE CENTERS, 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: ROBERT D'STEFANO
Name (Printed or typed)

21218 ST. ANDREWS BLVD #233
Address

BOCA RATON FL 33433
City, State & Zip

561-577-2720 MOBILE
Daytime Telephone number

BOBDISSTEFANO@COMCAST.NET
E-mail address: (to be used for future annual report notification)

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

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2009 JUL 13 PM 4:30

From the desk of:

Bob DiStefano

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2009 JUL 13 PM 4:30

July 10, 2009

To: Agent, State of Florida, Division of Corporation

From: Robert DiStefano, President, Quality Life Centers, Inc.

Please be advised of the following:

On January 31, I filed to incorporate Quality Life Centers, Inc. Document # P07000014319.

For various reasons I allowed it to expire on 09/01/2007

It is my desire to re-incorporate and use the same name, which I was told I could do by refilling and not waiting for the name to be again become available. I am to understand that I can not file online, but by submitting the following documents to you by U.S. Mail, my request will be accepted.

Accordingly please accept the attached incorporation papers and a check for \$87.50.

If necessary, please feel free to communicate with me at the address below, or
Phone: 561-577-2720 -- E-mail: bobdistefano@comcast.net.

Thanking you in advance,


Robert DiStefano
Filing as President for Quality Life Centers, Inc.

ARTICLES OF INCORPORATION

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

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DIVISION OF CORPORATIONS

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ARTICLE I NAME

The name of the corporation shall be:

QUALITY LIFE CENTERS, INC

ARTICLE II PRINCIPAL OFFICE

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

21218 ST. ANDREWS BLVD. #233, BOCA RATON, FL 33433

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE CORPORATION SHALL ENGAGE IN ANY ACTIVITY OR BUSINESS
PERMITTED UNDER THE LAWS OF THE UNITED STATES AND OF THE
STATE OF FLORIDA

ARTICLE IV SHARES

The number of shares of stock is:

250,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ROBERT DISTEFANO PRESIDENT
6554 LAS FLORES DRIVE
BOCA RATON FL 33433

ARTICLE VI REGISTERED AGENT

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

ROBERT DISTEFANO, PRESIDENT
6554 LAS FLORES DRIVE
BOCA RATON FL 33433

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROBERT DISTEFANO
6554 LAS FLORES DRIVE
BOCA RATON FL 33433

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

07-10-09

Signature/Incorporator

Date

07-10-09