

**P098000063320**

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 JUL 24 P 4: 26

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~~2009 JUL 24~~  
7-27-09  
uc

## COVER LETTER

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

SUBJECT: Campbells Adult Family Care Home, 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

☒ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

FROM: Ivanio and Annmarie Campbell  
                    Name (Printed or typed)

320 Pennsylvania Avenue  
                    Address

Ft. Lauderdale, Florida 33312  
                    City, State & Zip

(954) 554 2916 or (954)864 2523  
                    Daytime Telephone number

annmrcmp@bellsouth.net  
                    E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 15, 2009

IVANIO AND ANNMARIE CAMPBELL  
320 PENNSYLVANIA AVE.  
FT. LAUDERDALE, FL 33312

SUBJECT: CAMPBELLS ADULT FAMILY HOME CARE, INC.  
Ref. Number: W09000032475

We have received your document for CAMPBELLS ADULT FAMILY HOME CARE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6995.

Wanda Cunningham  
Regulatory Specialist II  
New Filing Section

Letter Number: 609A00024284

## **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:

**Campbells Adult Family Home Care, Inc.**

### **ARTICLE II PRINCIPAL OFFICE**

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

**320 Pennsylvania Avenue  
Ft. Lauderdale, Florida 33312**

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To provide adult services to the public and to transact any and all lawful business for which corporations may be incorporated, including but not limited to those powers enumerated in Florida Statutes 607.0302 et seq., as amended, and the doing of all lawful things related thereto.

### **ARTICLE IV SHARES**

The number of shares of stock is:

This corporation is authorized to issue Hundred (100) share of One and NO/100 Dollars (\$1.00) par value common stock. Each outstanding share shall be entitled to one (1) vote on each matter submitted to a vote at a meeting of the shareholders, unless otherwise designated as "NONVOTING" by a resolution recorded in the corporation's minute book and similar legend on the subject certificate(s). The shares of stock may be issued for such consideration, having a value not less than the par value of the shares issued thereof, as is determined from time to time by the board of directors, to be paid, in whole or in part, in cash or other property, tangible, or intangible in labor or services actually performed.

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Annmarie Campbell - President                      320 Pennsylvania Ave, Ft. Lauderdale, FL. 33312

Ivanio Campbell - Vice President                      320 Pennsylvania Ave, Ft. Lauderdale, FL. 33312

### **ARTICLE VI REGISTERED AGENT**

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

*IVANIO Campbell*  
320 Pennsylvania Ave, Ft. Lauderdale, FL. 33312

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TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

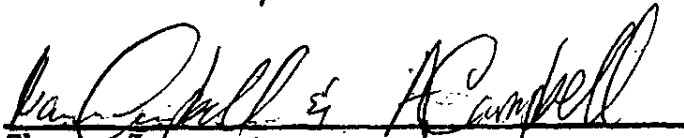
Ivanio and Annmarie Campbell  
320 Pennsylvania Ave, Ft. Lauderdale, FL. 33312

\*\*\*\*\*

*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

06-30-2009  
Date

  
Signature/Incorporator

06-30-2009  
Date