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COVER LETTER

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

SUBJECT: ANCHOR SUPPORT COORDINATION SERVICES, INC. (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)					
Enclosed are an origi	inal and one (1) copy of the article	es of incorporation and a	a check for:		
€ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy ADDITIONAL COF	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
			7 Ragonas		
FROM: JILL S. MACALISTER Name (Printed or typed)					
	16813 ROLLIN	IG ROCK DRIVE			
A decor					
TAMPA, FLORIDA 33618 City, State & Zip					
City, State & Zip					
813 269-5611 Daytime Telephone number					
	·	@aol.com	ORD TO NOTIFICATION	<u>ဒူ</u> 0	

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

ORiginal

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:

ANCHOR SUPPORT COORDINATION SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

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

16813 ROLLING ROCK DRIVE, TAMPA, FL 33618

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SUPPORT COORDINATION FOR INDIVIDUALS WITH DEVELOPMENTAL DISABILITIES

ARTICLE IV SHARES

The number of shares of stock is:

JILL S. MACALISTER

TAMPA FI 33618

16813 ROLLING ROCK DRIVE

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): JILL S. MACALISTER PRESIDENT 16813 ROLLING ROCK DRIVE TAMPA, FL 33618 ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Jil S. Mac Alister 16813 ROLLING ROCK DRIVE TAMPA, FLORIDA 33618	SECRETARY OF STATE. TALLAHASSEE, FLORIDA	2009 SEP -4 PM 3: 02	
TAMPA, FLORIDA 33618	in G	02	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	t.		

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

The Macallust	8/22/09
Signature/Registered Agent	Date
The mac alette	8/22/09
Signature/Incorporator	Date