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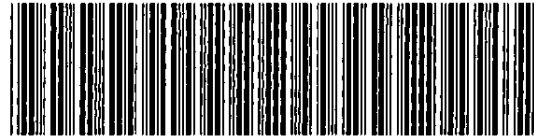
(Business Entry Name)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRB
10/2

COVER LETTER

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

SUBJECT: BETHESDA NURSING CARE, 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: Ms. Alberte DUclair-Andre
Name (Printed or typed)

41 NW 70th Street

Address

Miami, FL 33150

City, State & Zip

305 910 5230

Daytime Telephone number

alberte0607@yahoo.com

E-mail address: (to be used for future annual report notification)

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: **Bethesda Nursing Care, Inc.**

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TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is: 41 NW 70th Street, Miami, FL 33150

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to establish C-corporation for Nursing care business.

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): Ms. Alberte Duclair-Andre

ARTICLE VI REGISTERED AGENT

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

Ms. Alberte Duclair-Andre
41 NW 70th Street, Miami, FL 33150

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Ms. Alberte Duclair-Andre
41 NW 70th Street, Miami, FL 33150

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

Alberte Duclair-Andre
Signature/Registered Agent

Alberte Duclair-Andre
Signature/Incorporator

9/28/09
Date
9/28/09
Date