

Florida Department of State Division of Corporations

Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000213006 3)))



H090002130063ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I2000000019 : (305)552-5973 Phone

Fax Number : (305)220-1440

FLORIDA PROFIT/NON PROFIT CORPORATION

BEST CARE CENTER INC

Certificate of Status Certified Copy 1 03 Page Count \$78.75 **Estimated Charge**

Electronic Filing Menu

Corporate Filing Menu

FROM : LAZARUS

FAX NO. :3052201440

Oct. 02 2009 04:39PM P2

FILED

09 OCT -2 AH 10: 10

SECRETARY OF STATE TALLAHASSEE FLORIDA

H09000213006

ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

BEST CARE CENTER INC

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

4545 NW 7ST MIAMI FL 33126

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLES IV – INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JUAN CHAVEZ 4545 NW 75T MIAMI FL 33126

H09000213006

FILED

H09000213006

09 OCT -2 AM 10: 10

SECRETARY OF STATE TALLAHASSEE FLORIDA

ARTICLE V-INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:

JUAN CHAVEZ 45 45 NW 75T MIAMI EC 33126

ARTICLE VI-DIRECTOR (S)

Signature

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

JUAN CHAVEZ (P)

<u>CERTIFICATE OF DESIGNATION OF REGISTERED AGENT</u>
/REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature

H09000213006