

PO9000081860

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

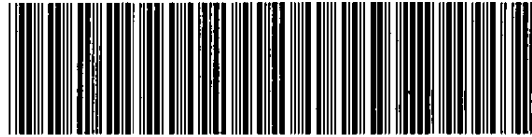
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

009-38332

Office Use Only



000159353640

08/24/09--01042--009 \*\*122.50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09 AUG 24 PM 2:00

APPROVED  
AND  
FILED

1/4

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

Re: STAR SPECIAL NEEDS INC.

To Whom It May Concern:

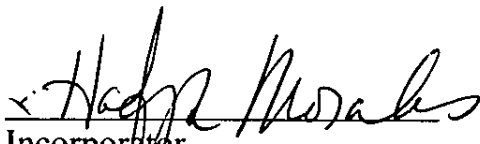
I am enclosing an original and one copy of the Articles of Incorporation for the above-proposed Corporation.

Also enclosed is a check/money order in the amount of \$122.50 for payment of the following fees:

Filing Fee	\$ 35.00
Certified copy fee	52.50
Registered Agent fee	35.00
Charter Tax	<u>00.00</u>
<b>TOTAL</b>	<b>\$122.50</b>

Please file the original articles and return the certified copy to me at the above address:

Sincerely

  
Incorporator  
Hafeeza Morales



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 25, 2009

HAFEEZA MORALES  
1419 LA PALOMA CIRCLE  
WINTER SPRINGS, FL 32708

SUBJECT: STAR SPECIAL NEEDS INC.  
Ref. Number: W09000038332

We have received your document for STAR SPECIAL NEEDS INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as incorporator in the document and the person signing as incorporator must be the same.

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) 245-6962.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 209A00028708

APPROVED  
AND  
FILED

09 AUG 24 PM 2:00

**ARTICLES OF INCORPORATION  
OF  
STAR SPECIAL NEEDS INC.**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

- ONE: The name of the Corporation is Star Special Needs Inc.
- TWO: **The duration of the Corporation shall be perpetual.**
- THREE: The **mailing and physical address** of the Corporation is  
1419 La Paloma Circle  
Winter Springs, FL 32708
- THREE (b): The effective date of the Corporation is to be August 19, 2009.
- FOUR: The general purpose or purposes for which this Corporation is being formed is/are to operate a Special needs patient care, including the elderly and handicap children, consulting and all other activities for which corporation may be incorporated under Chapter 607 of the Florida statutes.
- FIVE: The aggregate number of shares, which the Corporation shall have authority to issue, is:  
  
One Thousand (1,000) common shares having a par value of \$1.00 per share.
- SIX: The registered agent and the street address of the initial registered office of the Corporation in the State of Florida are:

Name

Address

Hafeeza Morales

1419 La Paloma Circle  
Winter Springs, FL 32708

SEVEN: The number of directors/officers constituting the initial Board of Directors is/are 3 and the name and address of each person who is to serve as a member thereof is as follows:

<u>Name</u>	<u>Address</u>
Hafeeza Morales President	1419 La Paloma Circle Winter Springs, Florida 32708
Raymond R Roach Vice President	1419 La Paloma Circle Winter Springs, Florida 32708

EIGHT: The name and address of the Sole Incorporator is:

<u>Name</u>	<u>Address</u>
Hafeeza Morales	1419 La Paloma Circle Winter Springs, Florida 32708

The internal affairs of the Corporation shall be governed by the By-Laws of the Corporation, which shall be adopted at first meeting of the Board of Directors.



APPROVED  
AND  
FILED

09 AUG 24 PM 2:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NINE: The names and street addresses and the number of shares subscribed to by the subscribers here to, who are also members of the first Board of Directors and who are to conduct the Business of the Corporation until those elected at the organizational meeting are:

<u>Name</u>	<u>Shares</u>
Hafeeza Morales	500 Shares
Raymond R. Roach	500 Shares

.....  
***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.***

Hafeeza Morales  
Signature/Registered Agent

8/19/09  
Date

Hafeeza Morales  
Signature/Registered Agent

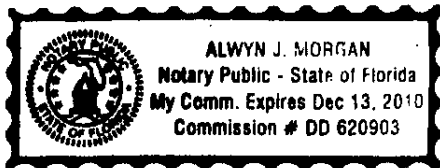
8/19/09  
Date

**STATE OF FLORIDA**

**COUNTY OF SEMINOLE**

**I, HEREBY CERTIFY** that on this day, before me, a Notary Public authorized in the State and County named above to take acknowledgments, personally appeared to me known to be the person Hafeeza Morales as the subscriber in and who executed the foregoing Articles of Incorporation, and acknowledged before me that he/she subscribed to those Articles of Incorporation.

**WITNESS** my hand and official seal in the County and State named above this 19<sup>th</sup> day of AUGUST, 2009.



A handwritten signature in dark ink, appearing to be 'Alwyn J. Morgan', written over a horizontal line.

Notary Public

My commission expires: 12/13/2010

A handwritten signature in dark ink, appearing to be 'Hafeeza Morales', written over a horizontal line.

Personally Known

Identification FL DRIVERS LICENSE M642-331-66-623-0