

P09000085560

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

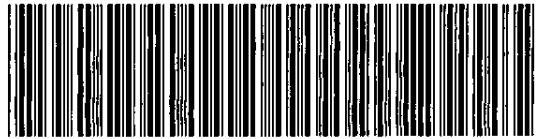
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800159539228

10/13/09--01050--003 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2009 OCT 13 PM 4:21

10/16/09

COVER LETTER

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

SUBJECT: LES ETOILES HEALTH 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
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: Elizabeth Mauvals-Jazon
Name (Printed or typed)

14137 SW 120th Ct.
Address

Miami, FL 33186
City, State & Zip

305-256-3799
Daytime Telephone number

AmourHC@gmail.com
E-mail address: (to be used for future annual report notification)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2009 OCT 13 PM 4:21

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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

2009 OCT 13 PM 4:21

ARTICLE I NAME

The name of the corporation shall be **LES ETOILES HEALTH CARE, INC.**

ARTICLE II PRINCIPAL OFFICE

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

14137 SW 120th Ct.
Miami, FL 33186

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business permitted in the state of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

Five-hundred (500) shares @ U.S. \$1.00 per share.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Elizabeth Mauvais-Jazon, 14137 SW 120th Ct. Miami, FL 33186 - President
Daiana Jazon, 14137 SW 120th Ct. Miami, FL 33186 - Vice President/ Director
Pavielle Briggs, 14137 SW 120th Ct. Miami, FL 33186 - Vice President/ Director

ARTICLE VI REGISTERED AGENT

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

C. Ray Briggs
14137 SW 120th Ct.
Miami, FL 33186

ARTICLE VII INCORPORATOR

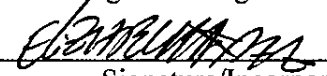
The name and address of the Incorporator is:

Pavielle Briggs
Daiana Jazon
Elizabeth Mauvais-Jazon, 14137 SW 120th Ct. Miami, FL 33186

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



Signature/Incorporator

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