

P09000101918

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

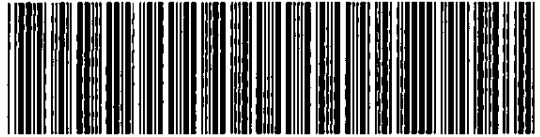
(Business Entity Name)

(Document Number)

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

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09 DEC 21 PM 10:03

W09000053546

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12-22-09

## COVER LETTER

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

SUBJECT: MAGNET ADULT HOME. SOUTH  
(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: GERDA WILLIAMS  
Name (Printed or typed)

6151 MIRAMAR PARKWAY. SUITE 310  
Address

MIRAMAR, FL. 33023  
City, State & Zip

305-607-5549  
Daytime Telephone number

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

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 8, 2009

GERDA WILLIAMS  
6151 MIRAMAR PARKWAY SUITE 310  
MIRAMAR, FL 33023

SUBJECT: MAGNET ADULT HOME, SOUTH  
Ref. Number: W09000053346

We have received your document for MAGNET ADULT HOME, SOUTH and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

An effective date may be added to the Articles of Incorporation if a 2010 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

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) 245-6869.

Christine Haney  
Senior Clerk  
New Filing Section

Letter Number: 109A00037394

RECEIVED  
09 DEC 21 PM 3:15  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Please Note that the Name ~~does~~ have a comma after Home and South.  
It is  
Magnet Adult Home South  
Thanks  
Garda Williams

# 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:

MAGNET ADULT HOME South, INC.

## ARTICLE II PRINCIPAL OFFICE

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

6151 MIRAMAR PARKWAY  
SUITE 310  
MIRAMAR, FL 33023

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to provide custodial and limited nursing services to elderly and disabled adults

## ARTICLE IV SHARES

The number of shares of stock is:

1000 (one thousand).

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

GERDA WILLIAMS - President  
DANIEL WILLIAMS - VP

## ARTICLE VI REGISTERED AGENT

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

GERDA WILLIAMS  
6151 MIRAMAR PARKWAY - Suite 310  
MIRAMAR, FL. 33023

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

GERDA WILLIAMS  
6151 MIRAMAR PARKWAY, Suite 310  
MIRAMAR, FL. 33023

\*\*\*\*\*

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

Gerda Williams  
Signature/Registered Agent

11-30-09

Date

Gerda Williams  
Signature/Incorporator

11-30-09

Date

09 DEC 21 PM 10:03

FILED