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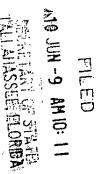
(Requestor's Name)
•
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
·
Special Instructions to Filing Officer:
Roberto GAVE
OT BY PHONE TO
CORRECT #5
DATE
DATE (6/11/10)
DOC. EXAM
·-

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: NUEVO HORIZONTE ASSISTED LIVING FACILITY, INC.

Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all corre	espondence concernin	ig this matter to:		
RO	BERTO CABRERA			
	Contact Person			
NUEVO HORIZON	ITE ASSISTED LIVI	NG FACILITY		
	Firm/Company			
81	11 N. OLA AVE W			
	Address			
T,	AMPA, FL., 33604			
	ity, State and Zip Code			
	HANDS@HOTMAI be used for future annual			
`		,		
For further information	on concerning this ma	itter, please call:		
ROBERTO CABRERA		_at (<u>813</u>)	817-1379	
Name of Contact Person		Area Code and Dayt	ime Telephone Number	
Enclosed is a check f	or the following amou	ant:		
\$105.00 Filing Fees	\$113.75 Filing Fees and Certificate of Status	\$113.75 Filing Fees and Certified Copy	\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS:		MAILING A		
Registration Section		Registration Section		
Division of Corporations		Division of Corporations		
Clifton Building		P. O. Box 63		
2661 Executive Cent Tallahassee, FL 323		Tallahassee,	FL 32314	
Tananassee, FL 323	VI			

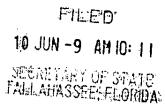
Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation



This Certificate of Conversion <u>and attached Articles of Incorporation</u> are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

therein.)

Signed	this17	day of	MAY	, 20 <u>10</u>	 •			
Required Signature for Florida Profit Corporation:								
Signatu been se	are of Chairm elected, an Inc	an, Vice Chairma	in Director, O	fficer, or, if Directors or C	Officers have not			
Timited	rvaine	DELITIO CABIT		TREGIDENT				
			ther Business	Entity: [See below for red	quired			
signatu	re(s).] ire: Name: <u>NE/S</u>	1 Y						
Signatu	ire:	V MILINIO Z		Title: MGRM				
Printed	Name: NGIS	T WUNUZ		_ Title: IVIGRIVI				
Signatu	ire:			mt.i				
Printed	Name:			Title:				
Signatu	ire:			_ Title:				
Printed	Name:			_ Title:				
Signatu	ire:			Title:	<u> </u>			
Printed	Name:			_ Title:				
Signatu	ıre:							
Printed	Name:			Title:				
Signatu	ıre:							
Printed	Name:			_ Title:				
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.								
If Flor	ida Limited F	Partnershin or Li	mitad Liahilit	v Limited Partnership:				
		eneral Partners.	micca Diabilit	, isimited i artifership.				
		iability Compan er or Authorized F						
All oth Signatu	ers: ire of an autho	orized person.						
Fees:								
1 0031	Certificate of	f Conversion:		\$35.00				
		ida Articles of In-	corporation:	\$70.00				
	Certified Col			\$ 8.75 (Optional) \$ 8.75 (Optional)				
	Certificate 0	i Status.		# 6.75 (Optional)				

ARTICLES OF INCORPORATION

In compliance with Chapter 607, F.S.

ARTICLE I NAME

The name of the corporation shall be: NUEVO HORIZONTE ASSISTED LIVING FACILITY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 8111 N. OLA AVE W, TAMPA, Florida 33604.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000. The par value of each share of stock is \$10.

ARTICLE V OFFICERS/DIRECTORS

The initial directors of the corporation are:

ROBERTO CABRERA PRESIDENT

8006 W POCAHONTAS AVE TAMPA FL 33615

JOSE O OSORIO

VICE PRESIDENT

6906 SHADY PLACE TAMPA FL 33634

ARTICLE VI REGISTERED AGENT

The name and Florida Street address of the registered agent is: J & R UNITED HANDS SERVICES CORP, 5521 AMBASSADOR DRIVE, TAMPA, Florida 33615. Located in the County of HILLSBOROUGH.

ARTICLE VII INCORPORATOR The name and street address of the incorporator to these Articles of Incorporation RO CABRERA, 8006 W POCAHONTAS AVE, TAMPA, Florida 33615.				- 1 T
I hereby accept the appointment as registered agent and agree to Signature: Signature: A RUNITED HANDS SERVICES CORP	Date 05-17-10	OF STRATE	AH 10: 12	
Signature: ROBERTO CABRERA Incorporator	Date <u>0577-18</u>	7		

The document was prepared by: NUEVO HORIZONTE ASSISTED LIVING FACILITY, INC., 8111 N. OLA AVE W, TAMPA, Florida 33604. 813-8171379