

P10000057352

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

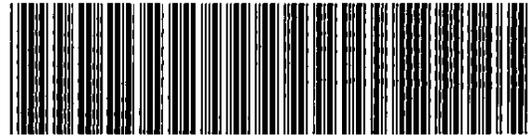
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 JUL 12 PM 2:19

APPROVED
AND
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PS 7/14/10

COVER LETTER

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

SUBJECT: Trinity Healthcare Advocates, 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: Laurie Anne Maloney

Name (Printed or typed)

16067 84th Court North

Address

Loxahatchee, Florida 33470

City, State & Zip

561-449-7944

Daytime Telephone number

mlm@trinityhealthcareadvocates.com

E-mail address: (to be used for future annual report notification)

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)

ARTICLE I NAME

The name of the corporation shall be:

Trinity Healthcare Advocates, Inc.

ARTICLE II PRINCIPAL OFFICE

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

16067 84th Court North
Loxahatchee, Florida 33470

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Health Care Advocacy

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Laurie Anne Maloney	President	Laurie Anne Maloney	Treasurer	Mark John Maloney	Secretary
Mark John Maloney	Vice President				

ARTICLE VI REGISTERED AGENT

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

Laurie Anne Maloney
16067 84th Court North
Loxahatchee, Florida 33470

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Laurie Anne Maloney
16067 84th Court North
Loxahatchee, Florida 33470

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.

Laurie Anne Maloney
Signature/Registered Agent

7/10/2010
Date

Laurie Anne Maloney
Signature/Incorporator

7/10/2010
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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