

P110000035402

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200199490962

03/30/11--01024--026 **78.75

Effective Date

05-01-11

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 APR - 8 AM 9:40

W 11-18523
691

Am 11/12/11

03/27/2011

To whom it may concern:

I'm sending you this letter because I want to dissolve my Florida not for profit corporation. The name of this corporation is Assured Quality Care, Inc. With that being said, I hereby release the name. In addition, I will not be revoking my decision in the future. Please dissolve this corporation first because I intend on reforming it as a **Florida for profit Corporation** under the same name.

Enclosed is a copy of the articles of dissolution for a nonprofit organization and a form for forming a **Florida for profit Corporation**. In addition, two checks are enclosed one for \$35.00 for the dissolution of the nonprofit organization and one for \$78.75, which is the filling fee & certificate of Status to form the for profit corporation under the same name **ASSURED QUALITY CARE, INC.**

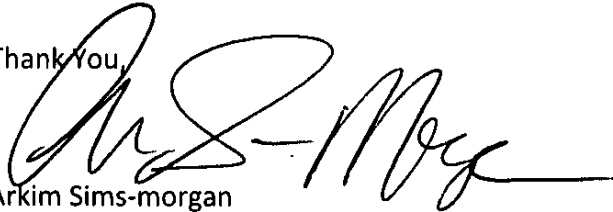
HIGHLIGHTS

- 1. I HEREBY RELEASE NAME ASSURED QUALITY CARE, INC.**
- 2. DISSOLVE FLORIDA NON PROFIT ORGANIZATION (N10000010149)**
- 3. MAY 1, 2011 REFORM ASSURED QUALITY CARE, INC AS A FOR PROFIT CORPORATION**
- 4. TWO CHECKS ARE ENCLOSED \$35.00 TO DISSOLVE NON-PROFIT \$ 78.75 TO REFORM COMPANY AS A FLORIDA FOR PROFIT CORPORATION AND TO OBTAIN A CERTIFICATE OF STATUS**

For futher information, feel free to contact me at 954-448-529 or at the following mailing address

Arkim Sims-Morgan
3009 NW 7TH ST
FT LAUDERDALE, FL 33311

Thank You,


Arkim Sims-morgan

President/Director

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 APR - 8 AM 9:40

COVER LETTER

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

~~Effective~~ May 1, 2011

NEW EIN # 90-0676220

SUBJECT: Assured Quality 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: Arkim Sims-Morgan
Name (Printed or typed)

3009 NW 7th St
Address

Fl. Lauderdale, FL 33311
City, State & Zip

954-448-5295
Daytime Telephone number

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

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



RECEIVED

11 APR -8 AM 10:41

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 1, 2011

ARKIM SIMS-MORGAN
3009 NW 7TH ST
FT LAUDERDALE, FL 33311

SUBJECT: ASSURED QUALITY CARE, INC
Ref. Number: W11000018523

We have received your document for ASSURED QUALITY CARE, INC 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 document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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) 245-6929.

Justin M Shivers
Regulatory Specialist II
New Filing Section

Letter Number: 811A00007892

(Corrected Copy)

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

Effective Date

05-01-11

ARTICLE I NAME

The name of the corporation shall be:

Assured Quality Care, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

3009 NW 7th St
Ft Lauderdale, FL
33311

Mailing address, if different is:

P.O. Box 14202
Ft Lauderdale, FL
33302

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose for Assured Quality Care, Inc is to educate, train, and assist children, adolescents, teens, and adults with or without disabilities. AQC will also provide affordable housing, Day Services, life skills, and transportation.

ARTICLE IV SHARES

The number of shares of stock is:

10,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Director

Name and Title: Arkim Sims-Morgan

Address: 3009 NW 7th St
Ft Lauderdale, FL
33311

Name and Title: Nichole Irving - officer

Address: 3009 NW 7th St
Ft Lauderdale, FL
33311

Officer

Name and Title: Dana Morgan

Address: 3009 NW 7th St
Ft Lauderdale, FL
33311

Name and Title:

Address:

Officer

Name and Title: Sherrod Levine

Address: 3009 NW 7th St
Ft Lauderdale, FL
33311

Name and Title:

Address:

ARTICLE VI REGISTERED AGENT

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

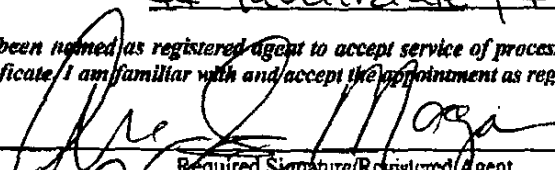
Name: Arkim Sims-Morgan
Address: 3009 NW 7th St
Ft Lauderdale, FL 33311

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Arkim Sims-Morgan
Address: 3009 NW 7th St
Ft Lauderdale, FL 33311

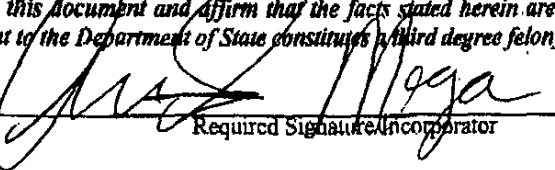
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

3/27/11
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

3/27/11
Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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