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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:				

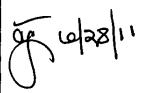




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SECRETARY OF STATE OIVISION OF CORPORATION



COVER LETTER

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

SUBJECT: We Care A.L.F., Inc.				
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)				
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
Filing Fee Filing Fee & Certificate of Status &	78.75 \$87.50 iling Fee Filing Fee, Certified Copy & Certificate of Status			
A	DDITIONAL COPY REQUIRED			
FROM: Ken Arena, EA Name (Printed or typed)				
912 Lithia Pinecrest Road				
Address				
912 Lithia Pinecrest Road Address Brandon, FL 33511-6121 City, State & Zip				
(813) 341-2501 Daytime Telepho	nne number			
damionmccummings@yahoo.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)

	In compliance with Chapter 607	and/or Chapter 621, F.S. (Pro	fit) FILEÜ
ARTICLE I	We Care A.L.F., Inc	2	SECRETARY OF STATE DIVISION OF CORPORATION
The name of the c	corporation shall be:	, .	
ARTICLE II	_PRINCIPAL OFFICE		7011 JUN 27 PM 2: 17
	Principal street address	Mailing a	address, if different is:
	9648 US Highway 301 S, Suite #206		
	Riverview, FL 33578-5442		
ARTICLE III	PURPOSE		
The purpose for v	which the corporation is organized is:		
to engage in and the Stat	ı providing assisted living facilities a e of Florida.	s permitted under the l	aws of the United States
ARTICLE IV	SHARES		
The number of sha	ares of stock is: authorized at two hundred (a \$.01 par value per share.	(200) shares of common s	tock - each having
	INITIAL OFFICERS AND/OR DIRECT		
	Fitle: Damion McCummings (P/T/D) Name and Title:	
Address:	12715 Stanbridge Drive	Address:	·
	Riverview, FL 33579-7759		
Name and T	Fitle: Gloria J. McCummings (V/S	-/D\ Name and Title:	
Address:	12715 Stanbridge Drive	Address:	
rudi eds.	Riverview. FL 33579-7759		
			
Name and T	Fitle:	Name and Title	
Address:			
			
ARTICLE VI	REGISTERED AGENT		
The name and Fl	orida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	Ken Arena, EA		
Address:	_912 Lithia Pinecrest Road		
	Brandon, FL 33511-6121		
ARTICLE VII	INCORPORATOR		
	dress of the Incorporator is:		
Name:	Damion_McCummings		
Address:	12715 Stanbridge Drive	<u> </u>	
	Riverview, FL 33579-7759		
	ned as registered agent to accept service of pro am familiar with and accept the appointment as		
Ke	Wen EA		June 24, 2011
	Required Signature/Registered Agent		Date
	ument and affirm that the facts stated herein		
document to the L	Department of State constitutes a third degree fe	lony as provided for in s.817.1	55, F.S.
\Leftrightarrow .	11/1/1		June 24, 2011
V	Required Signature/Incorporator		Date
	, 7		=

ARTICLES OF INCORPORATION (IN ACCORDANCE WITH Chapter 607 and/or Chapter 621, F.S. (Profit)

(Continued)

ARTICLE VIII EFFECTIVE DATE

The effective date of these articles of incorporation is June 24, 2011.