

P12000018452

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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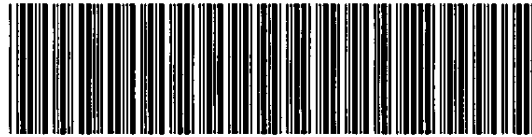
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/22/12--01018--004 **78.75

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12 FEB 22 AM 11:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRD
2/23/12

COVER LETTER

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

SUBJECT: Loving In-home 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: HUI CHAN FAN

Name (Printed or typed)

8365 Cessna Drive

Address

New Port Richey, FL 34654

City, State & Zip

863-669-7918

Daytime Telephone number

huichan fan <huichan_fan@yahoo.com.sg>

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)

FILED

12 FEB 22 AM 11:50

ARTICLE I NAME

The name of the corporation shall be: Loving In-home Care, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

8365 Cessna Drive
New Port Richey, FL 34654

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
Mailing address, if different from principal office address

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide personalized, in-home care for those who need daily assistance, or desire it.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: HUI CHAN FAN, President

Address: 8365 Cessna Drive
New Port Richey, FL 34654

Name and Title: _____

Address: _____

Name and Title: HUI CHAN FAN, Secretary

Address: 8365 Cessna Drive
New Port Richey, FL 34654

Name and Title: _____

Address: _____

Name and Title: HUI CHAN FAN, Treasurer

Address: 8365 Cessna Drive
New Port Richey, FL 34654

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

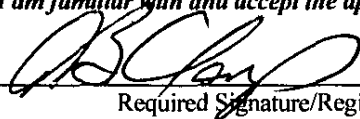
Name: Alton B. Clamp
Address: 10720 NW 66th Street, Suite 309
Doral, FL 33178

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Alton B. Clamp
Address: 10720 NW 66th Street, Suite 309
Doral, FL 33178

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

2-17-2012
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

2-17-2012
Date