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| (Re | equestor's Name) | |
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| (Cit | ty/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | isiness Entity Nar | me) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificate: | s of Status |

Office Use Only

W12-3207



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SECRUTARY OF STATE
TALLAHASSEE, FLORID

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FLORIDA DEPARTMENT OF STATE ANY CF STATE Division of Corporations ALLAHASSEE. FLORIDA

January 19, 2012

EMANUEL A. MORRE, ESQ. 111 E. MONUMENT AVENUE SUITE 302 KISSIMMEE, FL 34741

SUBJECT: TRINITY GUTIERREZ, P.A.

Ref. Number: W12000003207

We have received your document for TRINITY GUTIERREZ, P.A. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific business purpose of the professional association must be stated in the document.

012.12

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) 245-6949.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 712A00001281

COVER LETTER

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

| SUBJECT: Trinity Gutierrez, PA | | | | |
|--|-------------------------------------|--|--|--|
| (PROPOSED CORPORA | TE NAME – <u>MUST INCL</u> | .UDE SUFFIX) | | |
| Enclosed are an original and one (1) copy of the artic | cles of incorporation and | d a check for: | | |
| \$70.00 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certified Copy & Certificate of Status | | |
| | ADDITIONAL CO | DPY REQUIRED | | |
| ;;· | 50 | | | |
| FROM: Emanuel A. Moore, Esq. | (Printed or typed) | | | |
| 111 E. Monument Avenu | e, Suite 302 | | | |
| Kissimmee, Fl 34741 | State & Zip | | | |
| 407-348-0600 Daytime To | elephone number | | | |
| 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 NATIONAL The name of the corporation | AME Trinity Gutierrez, Inc. | | | |
|---|---|--|---|--------------|
| | RINCIPAL OFFICE Principal street address | | Mailing address, if different is: | |
| | Greenwich Court immee, FL 34758 | | enwich Court nee, FL 34758 | |
| | | | | |
| ARTICLE III PU The purpose for which | RPOSE 1 the corporation is organized is: | | | |
| Health/Home Ca | are, Senior Citizen Care & Assisted | d Living Care | | |
| | of stock is: 500 shares | | | |
| Name and Title: | <u>ITIAL OFFICERS AND/OR DIRECTOR:</u> Trinity Gutierrez/President | S Name and Title: | | |
| | 329 Greenwich Court | | - | |
| | Kissimmee, FL 34758 | | | |
| Name and Title: | | Name and Title: | | |
| Address: | | Address: _ | | |
| | | | | |
| Name and Title: | | Name and Title: | | |
| Address: | | Address: | | _ |
| | | - | | <u>.</u> |
| ARTICLE VI RE | GISTERED AGENT | - | , , , , | |
| | a street address (P.O. Box NOT acceptable) of | | nt is: | ugar. |
| Name: | Trinity Gutierrez | | A P | 1 9 |
| Address: | 329 Greenwich Court Kissimmee, FL 34758 | | villari | HILLER TO SE |
| | | • | SSE | |
| | CORPORATOR | | | |
| | s of the Incorporator is: | | = = * | neren t |
| Name: Address: | Trinity Gutierrez 329 Greenwich Court | | | ns en |
| ruaross. | Kissimmee, FL 34758 | • | 0A | |
| Having been named a this certificate, I am fa | ns registered agent to accept service of process amiliar with and accept the appointment as regi | for the above stat stered agent and a | ited corporation at the place designate agree to act in this capacity | ed in |
| List Date | | | 01-10-12 Date | |
| 111 | Required Signature/Registered Agent | | Date | |
| I submit this documend document to the Department | nt and affirm that the facts stated herein are rtment of State constitutes a third degree felony | true. I am aware as provided for in | that the false information submitted n s.817.155, F.S. | 'in a |
| f. tall | Z , | | 01-10-12 Date | |
| - Landed | Required Signature/Incorporator | | Date | |