

COVER LETTER

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

SUBJECT: Care Capture 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: Tyler Salem
Name (Printed or typed)

1671 Riveredge Rd
Address

Oviedo, FL, 32766
City, State & Zip

(727) 458-8816
Daytime Telephone number

Salem.tyler@gmail.com
E-mail address: (to be used for future annual report notification)

13 JAN 14 PM 3:55

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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: Care Capture Inc.

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE II PRINCIPAL OFFICE

Principal street address

13 JAN 14 PM 3:55
Mailing address, if different is:

1671 Riveredge Rd

Oviedo, FL 32766

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To produce, market, and sell
Solutions and products for the senior living industry.

ARTICLE IV SHARES

The number of shares of stock is: 100,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Tyler Salem, President Name and Title: _____

Address 1671 Riveredge Rd Address: _____

Oviedo, FL 32766 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

(conti.)

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Tyler Salem
Address: 1671 Riveredge Rd
Oviedo, FL 32766

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Tyler Salem
Address: 1671 Riveredge Rd
Oviedo, FL 32766

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

T. Salem
Required Signature/Registered Agent

1/7/2013
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.

T. Salem
Required Signature/Incorporator

1/7/2013
Date

13 JAN 14 PM 3:55
STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS