

713 000006159

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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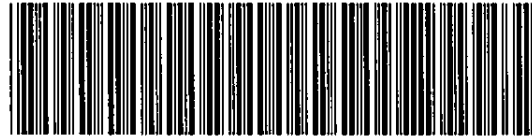
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

J. Shivers JAN 18 2013
255-2597
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112



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 14, 2013

OLIVENE JAMES
13125 SW 44 ST
MIRAMAR, FL 33027-3114

SUBJECT: OLIVENE GRAHAM JAMES HHA
Ref. Number: W13000002593

We have received your document for OLIVENE GRAHAM JAMES HHA and your check(s) totaling \$700.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

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) 245-6052.

Justin M Shivers
Regulatory Specialist II
New Filing Section

Letter Number: 613A00000964

COVER LETTER

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

SUBJECT: OLIVENE GRAHAM JAMES HHA
(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: OLIVENE GRAHAM JAMES
Name (Printed or typed)

13125 SW 44 STREET
Address

MIAMI, FL 33027-3114
City, State & Zip

954-804-7009
Daytime Telephone number

olivenegrahamjames@gmail.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)

ARTICLE I NAME

The name of the corporation shall be: Olivene Graham James HHA Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

13125 SW 44 Street

Miramar, FL 33027

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

Self-Employment as Independent Contractor.

Home Health Care Provider

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Olivene Graham James, President

Name and Title: _____

Address 13125 SW 44 Street

Address: _____

Miramar, FL 33027

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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(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: Olivene Graham James
Address: 13125 SW 44 Street
Miramar, FL 33027

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: George Burgos, The Burgos Group Inc.
Address: 2144 SW 25 Terrace
Miami, FL 33133

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TALLAHASSEE FLORIDA

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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

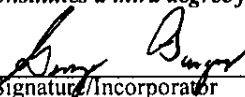


Required Signature/Registered Agent

01/14/2013

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.



Required Signature/Incorporator

01/14/2013

Date