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Special Instructions to	Filing Officer:			
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Office Use Only



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13 MAR 13 PH 4: 15
SECRETARY OF STATE
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T: Burch MAR 1 4 2013

COVER LETTER

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

SUBJECT:	Elizabeth Saunders, Inc.
	(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

	•		
• • •	\$78.75. Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED

FROM: E	Elizabeth Saunders			
1 KOWI	Name (Printed or typed)			
7:	34 Executive Center Dr #13			
	Address			
V	West Plam Beach, FL 33401			
	City, State & Zip			
7	72-480-0044			
Daytime Telephone number				
es	saunders2007@yahoo.com			

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 22, 2013

ELIZABETH SAUNDERS
734 EXECUCTIVE CENTER DR #13
WEST PALM BEACH, FL 33401

SUBJECT: ELIZABETH SAUNDERS, INC.

Ref. Number: W13000010932

We have received your document for ELIZABETH SAUNDERS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 013A00004380

13 MAR II AH 8: 00

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing ac	ldress, if different is:
	4 Executive Center Drive # 13		
_ <u>w</u>	est Palm Beach, FL 33401		
			
RTICLE III F	TURPOSE		
	ich the corporation is organized is: To pro	vide Services in the Hea	alth industry
• •			
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			MAR.
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	NII A DEG		(7)
RTICLE IV Share the number of share	SHARES		
he number of share	is of stock is.		
RTICLE V	INITIAL OFFICERS AND/OR DIRECT	rors	
	e: Elizabeth Saunders	Name and Title:	့် ကိ
Address:	734 Executive Center Drive #13	A delmaga	
	West Palm Beach, FL 33401		
		. <u>. </u>	
	e:		
Address:		Address:	
			
			·····
Name and Tit	le:	Name and Title:	
Address:			
	REGISTERED AGENT		
	ida street address (P.O. Box NOT acceptab	le) of the registered agent is:	
Name:	Elizabeth Saunders 734 Executive Center Drive #13		
Address:	West Palm Beach, FL 33401		
	West Falli Dead, Ft. 33401		
RTICLE VII	INCORPORATOR		
	ress of the Incorporator is:		
Name:	Elizabeth Saunders		
Address:	734 Executive Center Drive #13		
	West Palm Beach, FL 33401		
_			
	d as registered agent to accept service of pr		
iis certificate, I an	familiar with and accept the appointment a	s registered agent and agree to	act in this capacity
2/ /	\mathcal{A}		
Llizako	Required Signature/Registered Agent		12-30-2012
\mathcal{O}	Required Signature/Registered Agent		Date
	nent and affirm that the facts stated herein		
ocument to the De	partment of State constitutes a third degree	reiony as proviaed for in s.817.1	33, F.S.
11	with four to		
Flizal	ser sournairs		12-30-2012
	Required Signature/Incorporator		Date