

P/4000013731

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

W14-6692

02/14/14



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 31, 2014

TREVOR NOEL
923 SW 74TH AVE.
NORTH LAUDERDALE, FL 33068

SUBJECT: TREVESTER CARE INC
Ref. Number: W14000006692

We have received your document for TREVESTER CARE 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.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://www.sunbiz.org/titledef.html>.

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.)

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.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 214A00002294

COVER LETTER

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

SUBJECT: **TREVESTER 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: **TREVOR NOEL**

Name (Printed or typed)

923 SW 74th AVE

Address

NORTH LAUDERDALE, FL 33068

City, State & Zip

954-597-9530

Daytime Telephone number

sarahss6@aol.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: TREVESTER CARE INC

ARTICLE II PRINCIPAL OFFICE
Principal street address

923 SW74 th Ave
North Lauderdale, Fl 33068

Mailing address, if different is:

923 SW74 th Ave
North Lauderdale, Fl 33068

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: To provide health care

ARTICLE IV SHARES
The number of shares of stock is: 2

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Trevor Noel President
Address: 923 SW74th Ave
North Lauderdale, Fl 33068

Name and Title: Sarah Sylvester-Noel Secretary
Address: 923 SW74th Ave
North Lauderdale, Fl 33068

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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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: Sarah Sylvester- Noel

Address: 923 SW 74th Ave

North Lauderdale, FI 33068

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ARTICLE VII INCORPORATOR

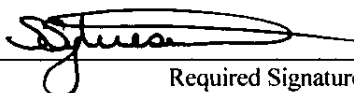
The name and address of the Incorporator is:

Name: Trevor Noel

Address: 923 SW 74th Ave

North Lauderdale, FI 33068

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

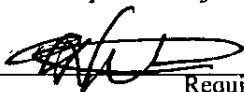


Required Signature/Registered Agent

2/9/2014

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

2/9/2014

Date