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Florida Department of State
Division of Corporations
Electronic Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:
Division of Corporations
Fax Number : (850) 617-6381

From:
Account Name : FILINGS, INC.
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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FLORIDA PROFIT/NON PROFIT CORPORATION

Integrated Home Care Services, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

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08/03/2015 9:50AM FAX 9546414192

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July 31, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

E-FILE, FILINGS, INC.

SUBJECT: INTEGRATED HOME CARE SERVICES, INC.
REF: W15000052026

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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.)

If you have any further questions concerning your document, please call (850) 245-6052.

Sylvia Gilbert
Regulatory Specialist II
New Filing Section

FAX Aud. #: H15000184702
Letter Number: 415A00016178

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:

Integrated Home Care Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

15476 NW 77th Court #703, Miami Lakes FL 33016

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Health Care Services

ARTICLE IV SHARES

The number of shares of stock is:

1,000 Voting stocks at \$1.00 Par Value

1,000 Non Voting Stocks at \$1.00 Par Value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Jorge A. Pereda, President

Linda Mendez, Treasurer

Linda Mendez, Secretary

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Falmes, Inc

3732 NW 16 Street

Fort Lauderdale, FL 33311

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Jorge A. Pereda

15476 NW 77th Court # 703

Miami Lakes FL 33016

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

Signature/Registered Agent

Signature/Incorporator

07-31-15

Date

07/29/15

Date

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CLERK OF DISTRICT COURT
NINTH JUDICIAL CIRCUIT
MIAMI, FLORIDA

H15000184702