

P15000093247

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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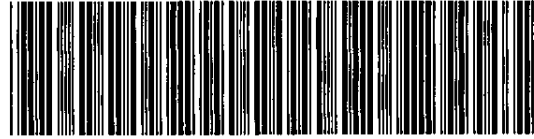
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/30/15--01004--013 **70.00

15 NOV 16 AM 8:52
RECEIVED
TALLAHASSEE, FLORIDA

11/15-73152

MD 11/18

COVER LETTER

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

SUBJECT: Gentle Touch and Love Adult Daycare 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: Esther Agledor

Name (Printed or typed)

170 NE 50 st

Address

Miami, FL 33137

City, State & Zip

(305) 879-1606

Daytime Telephone number

gentletouchandlove@gmail.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

November 5, 2015

ESTHER AGLEDOR
170 N.E. 50TH ST.
MIAMI, FL 33137

SUBJECT: GENTLE TOUCH AND LOVE ADULT DAYCARE INC.
Ref. Number: W15000073152

We have received your document for GENTLE TOUCH AND LOVE ADULT DAYCARE 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):

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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.

Maryanne Dickey
Regulatory Specialist II
New Filing Section

Letter Number: 315A00023460

October 24, 2015

To whom it may concern:

We the owners Dorothy Pierre, Nadeige Jean- Jules and Esther Agledor of the dissolved non-profit company Gentle Touch and Love Adult Day Care (N15000008768) are the same people and wish to reuse the name for our for profit company. This letter serves as authorization to let us reuse the name of our once non- profit company as our for profit Gentle Touch and Love Adult Daycare. Attached are the articles of incorporation.

x Esther Agledor
Esther Agledor
Vice President

15 NOV 16 AM 8:52
HALL COUNTY
ALABAMA
FLORENCE, ALABAMA

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: Gentle Touch and Love Adult Daycare Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

170 NE 50 ST

Miami, Fl 33137

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The purpose of our company is to provide the highest level of adult care services to our growing elderly population all while catering to their every need.

ARTICLE IV SHARES

The number of shares of stock is: 3

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dorothy Pierre- President

Name and Title: Nadeige Jean- Jules- Vice President

Address 925 NW 147 St

Address: 25 NW 48 st

Miami, Fl 33168

Miami, Fl 33127

Name and Title: Esther Agledor- Vice President

Name and Title: _____

Address 170 NE 50 St

Address: _____

Miami, FL 33137

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

15 NOV 16 AM 8:52
DEPARTMENT OF STATE
FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Esther Agledor
Address: 170 NE 50 St
Miami, FL 33137

ARTICLE VII INCORPORATOR

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

Name: Esther Agledor
Address: 170 NE 50 St
Miami, FL 33137

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 1/1/16 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Esther Agledor
Required Signature/Registered Agent

10/24/15
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.

[Signature]
Required Signature/Incorporator

11/13/15
Date