# **Electronic Articles of Incorporation For**

P16000016509 FILED February 18, 2016 Sec. Of State msolomon

BETTERCARE, INC.

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

# Article I

The name of the corporation is: BETTERCARE, INC.

## **Article II**

The principal place of business address:

1010 EAST ADAMS STREET 132 JACKSONVILLE, FL, . 32202

The mailing address of the corporation is:

2905 FRUITWOOD LANE JACKSONVILLE, FL. US 32277

## **Article III**

The purpose for which this corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

## **Article IV**

The number of shares the corporation is authorized to issue is: 100

## **Article V**

The name and Florida street address of the registered agent is:

LINDA L CURTIS 2905 FRUITWOOD LANE JACKSONVILLE, FL. 32277

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: LINDA L. CURTIS

## **Article VI**

**JAC** 

The name and address of the incorporator is:

LINDA L. CURTIS 0 EAST ADAMS STREET 101

132

KSONVILLE, FL 32277

Electronic Signature of Incorporator: LINDA L. CURTIS

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

#### **Article VII**

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P LINDA L CURTIS 2905 FRUITWOOD LANE JACKSONVILLE, FL. 32277 P16000016509 FILED February 18, 2016 Sec. Of State msolomon

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P16000016509
I Linda L. Curtis has no intention of revoking the dissolution of
Bettercare, LLC therefore I releasing the name for the use to another
entity.
SIGNATURE OF AFFIANT: Lundia Z. Luntin 2-22-16
SIGNATURE OF AFFIANT: Junta 2-22-16
Sworn to and subscribed before me this 22 day of 2 brusses
2016
De Chom
SIGNATURE OF NOTARY PUBLIC, STATE OF FLORIDA
LINDAC Garner (Print,
Type, or Stamp Commissioned Name of Notary Public) (Check one)
Affiant personally known to notary
LINDA C. GARNER Notary Public. State of Florida Commission # EE 207726 My comm. expires Julia 13, 2016
(Check one)
Affiant personally known to notary
ORAffiant produced identification Type of identification produced:
More Delies Liense