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Florida Department of State
Division of Corporations
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Division of Corporations
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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.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
CCH ADULT DAY TRAINING PROGRAM CORP**

Certificate of Status	0
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6/21/16

ARTICLES OF INCORPORATION

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

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ARTICLE I NAME: The name of the corporation is:

CCH Adult Day Training Program corp

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

9544 SW 140 CT
Miami, FL 33186**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

Yamillet Gonzalez (P)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Yamillet Gonzalez
9544 SW 140 CT
Miami FL 33186**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Yamillet Gonzalez
9544 SW 140 CT
Miami FL 33186SECRETARY OF STATE
TALLAHASSEE FLORIDA

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06/20/2016 14:24

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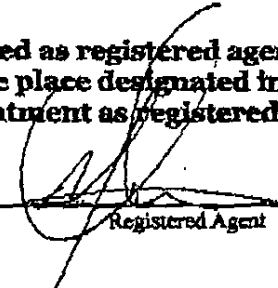
LAZARUS

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Required Signatures:

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

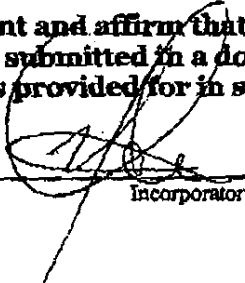


Registered Agent

6/10/16

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.



Incorporator

6/10/16

Date

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