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(Business Entity Name)

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17 AUG -4 AM 8:57
STATE
FILING OFFICE
TALLAHASSEE, FLORIDA

117-051367

08/07/17



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 3, 2017

SHIRLEY JOSEY *** 2ND CORRECTION ***
7324 WILLOW SPRINGS CIR. WEST.
BOYNTON BCH., FL 33436

SUBJECT: SERENITY OF HOPE
Ref. Number: W17000051367

RECEIVED
17 AUG -14 PM 4:19
BUREAU OF COMMERCIAL
INFORMATION SERVICES

We have received your document for SERENITY OF HOPE and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as incorporator in the document and the person signing as incorporator must be the same.

You failed to make the correction(s) requested in our previous letter.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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: 117A00012564



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 21, 2017

SHIRLEY JOSEY
7324 WILLOW SPRINGS CIR. WEST.
BOYNTON BCH., FL 33436

SUBJECT: SERENITY OF HOPE
Ref. Number: W17000051367

We have received your document for SERENITY OF HOPE and your check totaling \$87.50. However, the enclosed document has not been filed and is returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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.

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

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: 117A00012564

RECEIVED
17 JUN 30 AM 11:16
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

COVER LETTER

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

SUBJECT: _____

Serenity of Hope 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: _____

Shirley A Gosey
Name (Printed or typed)

2324 Willow Spgs Cir W
Address

Boynton Beach FL 33436
City, State & Zip

561-853-4325 OR 561-649-6227
Daytime Telephone number

Raven's place @att.net
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: Serenity of Hope Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7324 Willow Spgs Cir W
Boynton Beach FLA 33436

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Adult family Care Home

ARTICLE IV SHARES

The number of shares of stock is: (1) shares

FILED
JUL 21 1994
STATE
OF FLORIDA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Tracey Berry
Address: 7324 Willow Spgs Cir
W Boynton Beach
FL 33436

Name and Title: Vice President
Address: _____

Name and Title: Warren Rolle
Address: 7324 Willow Spgs Cir
Boynton Beach
FL 33436

Name and Title: Treasurer
Address: _____

Name and Title: Penny Rolle
Address: 7324 Willow Spgs Cir
W Boynton Beach
FL 33436

Name and Title: President
Address: _____

Name and Title: SHirley Gosey OWNER. Name and Title: S
Address: 7324 Willow Spgs Cir W Address: _____
Boynton Beach FL
33436.

ARTICLE VI REGISTERED AGENT

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

Name: SHirley Gosey
Address: 7324 Willow Spgs Cir W
Boynton Beach FL 33436

ARTICLE VII INCORPORATOR

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

Name: SHirley Gosey
Address: 7324 Willow Spgs Cir W
Boynton Beach FL 33436

17 AUG - 1 3:53
OFFICE OF THE CLERK
STATE OF FLORIDA

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

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

SHirley Gosey 6.16.2017
Required Signature of Registered Agent 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.

SHirley Gosey 8.1.2017
Required Signature of Incorporator Date

Michael Hazzard 6-16-17

Michael Hazzard

