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FALLAMASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE Division of Corporations

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BUREAU OF COMMERCIAL INFORMATION SERVICES

March 28, 2018

RUTHENIA MOSES P.O. BOX 120091 CLERMONT, FL 34712

SUBJECT: TRINITY INDEPENDENT LIVING CARE, CORP.

Ref. Number: W18000030061

We have received your document for TRINITY INDEPENDENT LIVING CARE, CORP. 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 designation of the registered agent must be at a Florida street address.

Please return 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.

Nadira D McClees-Sams Regulatory Specialist II

Letter Number: 718A00006280

Inclosed the construction of the phrone

COVER LETTER

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

SUBJECT:	IN to Independen	TL'USNY CARE	Colp
	PROPOSED CORPORA	TE NAME / MUST INCL	UDE SÚFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM:	P.O. Box 1200	(Printed or typed) Address	
	Clermon	FA. 341	12
	(352)9	State & Zip 08-8273	3
	Kuthen: Amos	elephone number	OM)
	E-mail address: (to be used	i tot turkte aminat tebou n	ionneanon)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION OF TRINITY INDEPENDENT LIVING CARE, CORP.

THE UNDERSIGNED, acting as sole incorporator Trinity Independent Living Care under chapter 607 of the Florida Statutes, hereby adopts the following Articles of Incorporation for such Corporation:

ARTICLE I

<u>Name</u>

The name of the corporation shall be Trinity Independent Living Care, Corp.

ARTICLE II

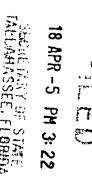
Principal Office

The address of the Principal Office of the corporation is 7344 Country Run Parkway- Orlando, Fl. 32818. The location of the Principal Office shall be subject to change as may be provided in bylaws duly adopted by the corporation.

ARTICLE III

<u>Purpose</u>

The purpose for which the Corporation is organized and operated is to provide 24 hour care and housing for men and women in need of care. This Corporation will operate for the sole purpose of carrying on a Trade or Business for profit.



ARTICLE IV

Shares

The number of shares which the corporation shall have authority to issue is (10,000). Consisting of a single class of common stock, One Cent (\$0.01) par-value per share,

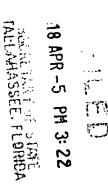
ARTICLE V

Names and Address of Director and Officers

President-Yvronie Justin 7344 Country Run Parkway Orlando, Fl. 32818

Vice President – Karlson Justin 7344 Country Run Parkway Orlando, Fl. 32818

Secretary-Janie Domond 7344 Country Run Parkway Orlando, Fl. 32818



ARTICLE VI

Mailing Address

The mailing address of the Corporation will be 7344 Country Run Parkway Orlando, Fl. 32818.

ARTICLE VII

Initial Board of Directors

The number of Directors constituting the initial Board of Directors of the corporation is two. The number of Directors may be increased or decreased from time to time, but in no event shall the number of Directors be less than one (1). The person who is to serve as initial Director until the first annual meeting of the shareholders of the corporation or until such successor Directors are elected and shall qualify is Yronie Justin.

ARTICLE VIII

Initial Registered Agent and Address

The name and address of the registered agent shall be as follows: Yvronie Justin 7344 Country Run Parkway- Orlando, Fl.32818

(I hereby am familiar with and accept the duties and responsibilities as registered agent for said Corporation/Limited Liability Company.)

Signature/Registered Agent

Frint Name/ Date 4/4/18

ARTICLE XI

Name and Address of Incorporator

The name and address of the Incorporator is Ruthenia Moses, P. O. Box 120091- Clermont, Fl. 34712

Signature /Incorporator

Print Name/Date