

P200000009563

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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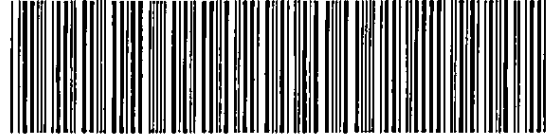
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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N CULLIGAN

FEB 5 2020



**Department of State  
Division of Corporations**

**Stealth Courier LLC  
1531 Commonwealth Business Dr.  
Ste 105  
Tallahassee, Fl. 32303  
850-294-5632**

**Stealth Courier Box**

20FPD-4 3411:46

**Company: Ameerah Adejola**

**Requester:**



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:

Princeton Health, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

2412 N State Road 7  
Lauderdale Lakes, FL 33313

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

for any and all lawful  
business purposes.

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ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Prinston Jean Glaude

Name and Title:

Edwige Jean Glaude

Address

2412 N State Road 7  
Lauderdale Lakes, FL 33313  
President

Address:

2412 N State Road 7  
Lauderdale Lakes, FL 33313  
Vice President

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Prinston Jean Glaude  
Address: 2412 N State Road 7  
Lauderdale Lakes, FL 33313

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Prinston Jean Glaude  
Address: 2412 N State Road 7  
Lauderdale Lakes, FL 33313

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 1/28/2020 (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*

Prinston Jean Glaude  
Required Signature/Registered Agent

1/28/2020  
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.*

Prinston Jean Glaude  
Required Signature/Incorporator

1/28/2020  
Date

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