

P200000022708

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

J DENNIS

MAR 17 2020



500341172965

03/02/20--01021--025 \*\*67.50

2014R-2 PH 1:81

COVER LETTER

20 MAR -2 PM 1:31

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

SUBJECT: CARESS Independent Living Home, 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  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: Ruthenia MOSES  
Name (Printed or typed)

P.O. Box 120091  
Address

CLERMONT, FL. 34712  
City, State & Zip

(352) 408-8273  
Daytime Telephone number

RutheniaMoses@Yahoo.com  
E-mail address: (to be used for future annual report notification)

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

S.V.  
20 MAR -2 PM 1:31

**ARTICLES OF INCORPORATION  
OF  
CARESS INDEPENDENT LIVING HOME, INC.**

**THE UNDERSIGNED**, acting as sole incorporator of Caress Independent Living Home, Inc., under chapter 607 Of the Florida Statutes, hereby adopts the following Articles of Incorporation for such Corporation:

**ARTICLE I**

**Name**

The name of the corporation shall be Caress Independent Living Home, Inc.

**ARTICLE II**

**Principal Office**

The address of the Principal Office of the corporation 2928 Magnolia Blossom Circle – Clermont, FL 34711. The location of the Principal Office shall be subject to change as may be provided in bylaws duly adopted by the corporation.

**ARTICLE III**

**Purpose**

**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.**

20 MAR -2 PM 1:31

#### **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- Guerda Chrispin Pierre  
2928 Magnolia Blossom Circle  
Clermont, Fl. 34711**

**Vice President – Daniel Pierre  
2928 Magnolia Blossom Circle  
Clermont, Fl. 34711**

**Secretary- Valery Chrispin  
2928 Magnolia Blossom Circle  
Clermont, Fl. 34711**

#### **ARTICLE VI**

##### **Mailing Address**

The mailing address of the Corporation will be 2928 Magnolia Blossom Circle – Clermont, Fl. 34711.

ARTICLE VII

Initial Board of Directors

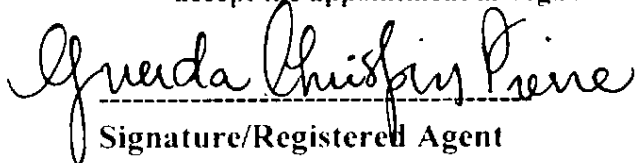
The number of Directors constituting the initial Board of Directors of the corporation is two. The number of Directors may be increased or decreased from time to time, but in no event shall the number of Directors be less than one (1). The person who is to serve as initial Director until the first annual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

ARTICLE VIII

Initial Registered Agent and Address

The name and address of the registered agent shall be as follows:  
Guerda Chrispin Pierre – 2928 Magnolia Blossom Circle – Clermont, FL.  
34711

(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.)

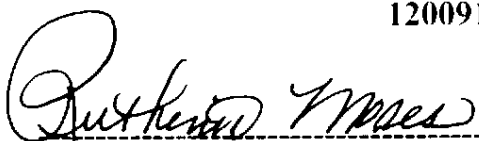
  
Signature/Registered Agent

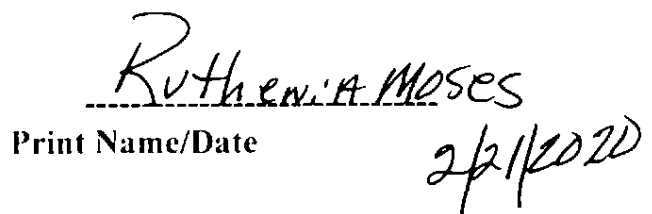
  
Print Name/ Date 2-21-2020

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 2/21/2020