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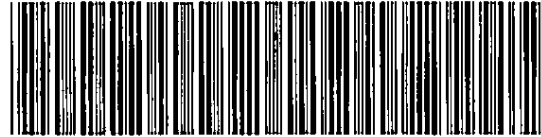
(Business Entity Name)

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Derrick Thompson

COVER LETTER

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

SUBJECT: SURE CARE NURSING SERVICES, 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: CLIFTON H. RODRIQUEZ, CPA

Name (Printed or typed)

3146 NW 68th STREET

Address

FORT LAUDERDALE, FLORIDA 33309-1206

City, State & Zip

(954) 557-9038

Daytime Telephone number

crodz13@gmail.com/hughmongous54@comcast.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

For

Sure Care Nursing Services, Inc.

The undersigned subscribers(s) for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:

Article I-Name of the Corporation

The name of the corporation shall be:

Sure Care Nursing Services, Inc.

Article II-Nature or Purpose of the Business

The purpose of the corporation is to engage in any lawful activity permitted by the laws of this state. The corporation will provide nursing care and related healthcare services to its patient base in the Tri-county area, the State of Florida and the United States. The corporation will comply with any professional regulations imposed by state agencies within the State of Florida as well.

Article III-Principal Office

The principal business mailing address of this corporation shall be:

1677 NW 91st Avenue
Ste. No.625
Coral Springs, Florida 33071

The principal place of business of this corporation shall be as follows:

1677 NW 91st Avenue
Ste. No. 625
Coral Springs, Florida 33071

Article IV-Number of Shares Authorized

The number of common shares of stock that this corporation is authorized to have outstanding at any one time is:

One Thousand (1000)

(The par value of the corporation common stock will be \$1.00) Elaine V. Grant will own one hundred percent (100%) of the outstanding shares of the corporation.

ARTICLES OF INCORPORATION

For

Sure Care Nursing Services, Inc.

Article V-Initial Registered Agent

The name and address of the initial registered agent is:

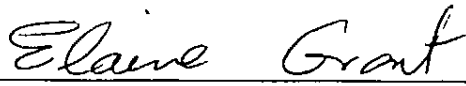
Elaine V. Grant
1677 NW 91st Avenue
Apt No. 625
Coral Springs, Florida 33071

Article VI-Subscriber (s) To These Articles of Incorporation

Elaine V. Grant
1677 NW 91st Avenue
Apt No. 625
Coral Springs, Florida 33071

The undersigned incorporator(s) has executed these Articles of Incorporation this

25th day of June 2020



(Signature)

Article VI: Perpetual Life of the Corporation

The corporation shall exist perpetually, or until such time that the Board of Directors and/or shareholder(s) decide to dissolve the corporation.

Article VII-Appointment of Officers & Directors

The subscriber(s) of this corporation has appointed the following officers and directors of the corporations. These officers and directors will serve in accordance with the bylaws of the corporation:

<u>Name</u>	<u>Address</u>	<u>Title</u>
1. Elaine V. Grant	1677 NW 91 st Avenue Apt No. 625 Coral Springs, Florida 33071	President/CEO

ARTICLES OF INCORPORATION

For

Sure Care Nursing Services, Inc.

<u>Name</u>	<u>Address</u>	<u>Title</u>
2. Elaine V. Grant	1677 NW 91 st Avenue Apt No.625 Coral Springs, Florida 33071	Corporate Secretary Director
3. Elaine V. Grant	1677 NW 91 st Avenue Apt No. 625 Coral Springs, Florida 33071	Chairperson, Board of Directors

ARTICLES OF INCORPORATION

For

Sure Care Nursing Services, Inc.

**CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENTS IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **Sure Care Nursing Services, Inc.**

2. The name and address of the registered agent and office are as follows:

**Elaine V. Grant
1677 NW 91st Avenue
Suite No.625
Coral Springs, Florida 33071**

Having been named as registered agent and to accept service for the above stated corporation at the place designated in this Certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Elaine Grant
(Signature)

8/21/2020
(Date)