Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

FLORIDA PROFIT/NON PROFIT CORPORATION ANGELS LIFE AND CARE INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

were

ARTICLE 1 NAME: The name of the corporation is:	
ANGERS LIFE AND CARE INC	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
24391 Sw 108th PL, HOMESTEAD, FT, 33032	
ARTICLE III SHARES: The number of shares of stock is:	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
ANTEINS FERNANDEZ FERNER PRESIDENT ANGEL ENGIQUE CARRENO Aviles VICE P	
Aveel Eugrove CAMRENO Aviles Vice P	
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ARTICLE V INITIAL REGISTERED AGENT AND STATES	표 도
The name and Florida street address (PO Box not acceptable) of the registered agent is	<u>c</u>
Artettys Fernandez Ferrer mi 24391 SW 108th Pl Homestead Fl	
24391 SW 108th 11 Homestead FI	
33037	
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:	
Arlettys Fernandez Ferrer	
24391 SW 108th PI Homestead F	
22/37	

Required Signatures:

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



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.

Incorporator Date 202,