

P230000 2114

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

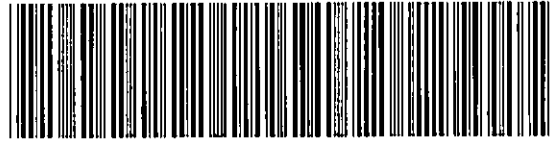
(Business Entity Name)

(Document Number)

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

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Office Use Only



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2023 Feb, 23 AM 10:13

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## COVER LETTER

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

SUBJECT: Judah Loving Care 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status  
**ADDITIONAL COPY REQUIRED**

FROM: Neville R Francis  
Name (Printed or typed)

164 Wimbledon Lake Drive  
Address

Plantation FL 33324  
City, State & Zip

786 315 3091  
Daytime Telephone number

Vilma Francis only@my mofc.net  
E-mail address: (to be used for future annual report notification)

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

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10/11  
10/10

ED

**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: Judah Loving Care Home Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal <sup>street</sup> address  
164 Wimbledon Lake Drive  
Plantation FL 33324

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Provide Community Care Living  
For <sup>NF</sup> ~~Retiree~~ Client Disability Group Home.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Neville R Francis (Pres) Name and Title: \_\_\_\_\_

Address: 164 Wimbledon Lake Address: \_\_\_\_\_  
Drive Plantation FL  
33324

Name and Title: Vilma D Francis (VP) Name and Title: \_\_\_\_\_

Address: 164 Wimbledon Lake Address: \_\_\_\_\_  
Drive Plantation  
FL 33324

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

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

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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: Wilma D. Francis

Address: 164 Wimbledon Lake  
Dr Plantation FL 33324

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Neville R Francis

Address: 164 Wimbledon Lake  
Dr Plantation FL 33324

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 2/28/2023 (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*

Wilma D. Francis

Required Signature/Registered Agent

2/20/23  
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.*

Neville Francis

Required Signature/Incorporator

2/20/2023  
Date

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FILED

17

Mail body: Fwd: Request to use name

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Sent from my iPhone

Begin forwarded message:

**From:** Vilma Francis <vilma.francis001@nymdc.net>  
**Date:** February 17, 2023 at 10:19:27 PM EST  
**To:** Vilma Francis <vilma.francis001@nymdc.net>  
**Subject:** Request to use name

Judah loving care home inc  
164 Wimbledon lake drive  
Plantation Florida 33324  
Vilma.francis001@nymdc.net  
786-315-3091

To whom it may concern,

I am here by to state that the above entity file # P21000002365 was administrative dissolution for annual report on 09/23/2022. I am requesting to use the above name on my new business filing I am the owner of the above business name but due to the fact that the license was not approved on time I would like to refile for my license using same name because all my documents are stamped with this name.

I am asking the state to grant me request to use Judah loving care home inc;

Sincerely  
Neville R Francis

*Neville Francis*  
*2/20/23*

3-D  
2023 FEB 20 AM 10:18  
RECEIVED  
CLERK OF COURT  
CLERK OF COURT