

P 95000017868

Jacquelyne Bendig & Antonio Benetiz
Requestor's Name

771 West 27 Street

Address

Hialeah, FL 33010

City

State

Zip

Phone

CORPORATION(S) NAME

GERIATRIC PROFESSIONAL CARE, CORP.

XXX Profit

☐ NonProfit☐ Amendment☐ Merger☐ Foreign☐ Dissolution/Withdrawal☐ Mark☐ Limited Partnership☐ Annual Report☐ Other☐ Reinstatement☐ Reservation☐ Change of R.A.☐ Certified Copy☐ Photo Copies☐ CUS☐ Call When Ready☐ Call if Problem☐ After 4:30☐ Walk In☐ Will Wait☐ Pick Up☐ Mail Out

Name

Availability

Document

Examiner

Updater

Verifier

Acknowledgment

W P Verifier

CR2E031 (1-89)

FILED
 05 MAR -3 21 9:34
 HALL COUNTY, FLORIDA

42-10

ARTICLES OF INCORPORATION

ARTICLES I

NAME

THE NAME OF THIS CORPORATION IS GERIATRIC PROFESSIONAL CARE, CORP.
and the mailing address is 771 West 27 Street, Hialeah, FL 33010.

ARTICLE II

DURATION

This corporation shall have a perpetual existence, unless dissolved according to law.

ARTICLE III

PURPOSE

This corporation is organized for the purpose of transacting any or all business for which corporation may be incorporated under the Florida General Corporation Act.

ARTICLE IV

CAPITAL STOCK

This corporation is authorized to issue Five Hundred (500) shares of One Dollar (1.00) Par value common stock, which shall be designated "COMMON SHARES."

ARTICLE V

INITIAL REGISTERED OFFICE & AGENT

The street address of the initial registered office of this corporation is 771 West 27 Street
Hialeah , Florida, 33010 ,and the name of the initial registered agent of this corporation at that address
Jacquelyne Bendig.

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95 MAR -3 AM 9:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI
INITIAL BOARD OF DIRECTOR(S)

This corporation shall have (3) (three) director(s) initially. The number of director(s) may be either increased or decreased from time to time by the By-Laws, but shall never be less than one. The name(s) and address(es) of the initial director(s) of this corporation is/are:

Maria Gonzalez
771 West 27 Street
Hialeah, Fl 33010

Jacquelyne Bendig
771 West 27 Street
Hialeah, Fl 33010

Antonio Benetiz
771 West 27 Street
Hialeah, Fl 33010

ARTICLE VII
INDEMNIFICATION

To the full extent permitted by law, the corporation shall indemnify each person made or threatened to be made a party to any threatened, pending or completed action, suit, or proceeding, whether civil, criminal, administrative or investigative (including, one in the right of the corporation to procure a judgement in its favor) by reason of the fact that her or his testator or intestate, is or was a director, officer, employee or agent of the corporation or served any other corporation, partnership, joint venture, trust, or other enterprise in any capacity, at the request of the corporation.

ARTICLE VIII
OFFICERS

The officers of this corporation shall be as follows:

Maria Gonzalez
Jacquelyne Bendig
Antonio Benetiz

President
Vice President & Secretary
Treasurer

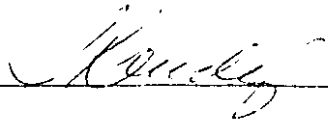
ARTICLE IX
INCORPORATORS(S)

The name(s) and street address(es) of the incorporator(s)
to these Articles of Incorporation is/are as follows:

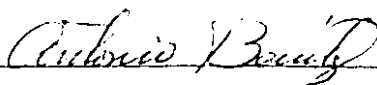
Jacquelyne Bendig
771 West 27 Street
Hialeah, FL 33010

Antonio Benetiz
771 West 27 Street
Hialeah, FL 33010

The undersigned incorporator(s) has/have executed these
Articles of Incorporation on this 6 day of
February, 1995.



6

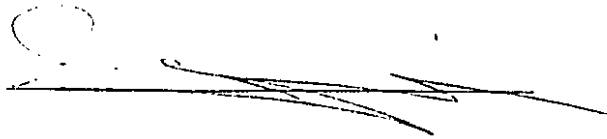


STATE OF FLORIDA)
COUNTY OF DADE)

BEFORE ME, notary public authorized to take acknowledgments in the state and county set forth above personally appeared Jacquelyne Bendig & Antonio Benetiz known to me and known by me to be the person who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the state and county aforesaid this
6 day of February, 1995.

My commission expires:



NOTARY PUBLIC STATE OF FLORIDA
MY COM. EXPIRES 12/31/95
Bonded Under Notary Public Underwriters

FILED
95 MAR -3 AM 9:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

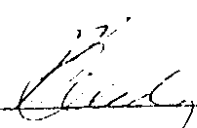
CERTIFICATE DESIGNATION PLACE OF BUSINESS OR DOMICILE FOR
THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT
UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 48.091 Florida Statute, the following
is submitted, in compliance with said Act:

First -- That GERIATRIC PROFESSIONAL CARE, CORP.
desiring to organize under the laws of the State of Florida
with its principal office, at 771 West 27 Street
City of Hialeah , County of Dade, State of
Florida, has named Jacquelyne Bendig
located at 771 West 27 Street
City of Hialeah , County of Dade, State of
Florida, as its agent to accept service of process of within
this state.

Having been named to accept service of process of the
above stated corporation, at place designated in this
certificate, I hereby accept to act in this capacity, and
agree to comply with the provision of said Act relative to
keeping open said office.

BY:



RECEIVED STATE
TALLAHASSEE, FLORIDA

95 MAR -3 AM 9:35

FILED

P95000017868

Maria Gonzalez

(Requestor's Name)

353 East 33rd St, Apt #103

(Address)

Hialeah, Fl. 33013

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

95 JUN 13 AM 9:32
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #) **300001512303**
4. _____
(Corporation Name) (Document #) **-06/14/95--01003--001**
*******40.00 *****35.00**

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
☐	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

O/D Resig
6/21
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Examiner's Initials



Florida Department of State, Jim Smith, Secretary of State

RESIGNATION OF OFFICER AND/OR DIRECTOR

AFFIDAVIT

STATE OF FLORIDA
COUNTY OF DADE

FILED
95 JUN 13 AM 9:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I MYRIAM RESTREPO after being duly sworn, state that to the best of my knowledge, information and belief, and under penalties of perjury, following is true and correct:

1. I ANTONIO BENTER hereby resign as TREASURER
(Title)
GERIATRIC PROFESSIONAL CARE, CORP. a Florida corporation
(Name of Corporation)

2. That the corporation has been notified in writing of the resignation; and
3. That corporate minutes relating to the resignation are unavailable.

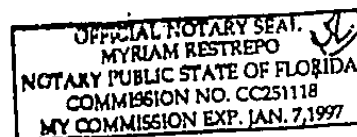
FURTHER AFFIANT SAYETH NOT.

Antonio Benter
AFFIANT

Sworn to and subscribed before me this 18TH day of APRIL 1995

Myriam Restrepo
NOTARY PUBLIC

My Commission Expires: JAN. 7, 1997



DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

(904) 487-6051

CH2E044 (12-87)

P95000017868

Marla Gonzalez
353 East 33rd Street
Apt. #103
Hialeah, FL 33013

(City, State, Zip) (Phone #)

OFFICE USE ONLY

FILED
95 JUN 13 AM 9:33
SECRETARY OF STATE
TALLAHASSEE FLORIDA

400001512304
-06/14/95--01003--001
*****40.00 *****5.00

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. _____ (Corporation Name) (Document #) 400001512304
-06/14/95--01003--002
*****30.00 *****30.00
2. _____ (Corporation Name) (Document #)
3. _____ (Corporation Name) (Document #)
4. _____ (Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

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	NonProfit
	Limited Liability
	Domestication
	Other

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	Reinstatement
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	Other

O/D resig
6/21
JB

Examiner's Initials



Florida Department of State, Jim Smith, Secretary of State

RESIGNATION OF OFFICER AND/OR DIRECTOR

AFFIDAVIT

STATE OF FLORIDA
COUNTY OF DADE

FILED
95 JUN 13 AM 9:35
TALLAHASSEE, FLORIDA

I MYRIAM RESTREPO after being duly sworn, state that to the best of my knowledge, information and belief, and under penalties of perjury, the following is true and correct:

1. MARIA GONZALEZ hereby resign as PRESIDENT
(Title)
GERIATRIC PROFESSIONAL CARE, CORP., a Florida corporation
(Name of Corporation)

2. That the corporation has been notified in writing of the resignation; and
3. That corporate minutes relating to the resignation are unavailable.

FURTHER AFFIANT SAYETH NOT.

Myria Restrepo
AFFIANT

Sworn to and subscribed before me this 18th day of APRIL 1995

Myriam Restrepo
NOTARY PUBLIC

My Commission Expires: JAN. 7, 1997

~~RECEIVED~~

OFFICIAL NOTARY SEAL
MYRIAM RESTREPO
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC251118
MY COMMISSION EXP. JAN. 7, 1997

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
(904) 487-6051