

P9500041230

TRANSMITTAL LETTER

FILED
95 MAY 22 PM 12:07
TALLAHASSEE, FLORIDA

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

SUBJECT: CARE CONSTRUCTION COMPANY
(Proposed corporate name - must include suffix)

200001495882
-05/22/95---01020--005
****131.25 ****131.25

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: Jocelyn P. Riley
Name (printed or typed)

19831 N.E. 10th Court
Address

North Miami, Florida 33179
City, State & Zip

305 324-4455 xt 4896 305-653-4616
Daytime Telephone number

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

D. BROWN MAY 25 1995

ARTICLES OF INCORPORATION

FILED
95 MAY 22 PM 12:07
MILLER 111-122881

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

CARE CONSTRUCTION COMPANY

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

19831 N.E. 10th Court
North Miami, Florida 33179

ARTICLE III - SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Austin W. Robinson
19831 N.E. 10th Court
North Miami, Florida 33179

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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


Austin W. Robinson President
19831 N.E. 10th Court
North Miami, Florida 33179

Jocelyn P. Riley Vice- President
19831 N.E. 10th Court
North Miami, Florida 33179

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

17th day of May, 19 95.


Signature


Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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

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

1. The name of the corporation is: CARE CONSTRUCTION COMPANY

2. The name and address of the registered agent and office is:

Austin W. Robinson
(NAME)

19831 N.E. 10th Court

(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

North Miami, Florida 33179
(CITY/STATE/ZIP)

Having been named as registered agent and to accept service of process 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 obligations of my position as registered agent.

 5-7-95
(SIGNATURE) (DATE)