

# F02000006209

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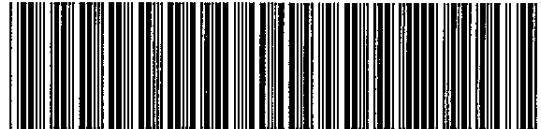
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Acknowledgement

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W. P. Verifyer

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ELite Homecare, Inc.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

David H. Neel  
(Name of Person)

ELite Homecare, Inc.  
(Firm/Company)

P.O. Box 303  
(Address)

Ivy, VA 22945  
(City/State and Zip code)

For further information concerning this matter, please call:

David Neel  
(Name of Person)

at (434) 296-4155  
(Area Code & Daytime Telephone Number)

STREET ADDRESS:  
Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

MAILING ADDRESS:  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

① money

Enclosed is a check for the following amount:

☒ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy



FLORIDA DEPARTMENT OF STATE

Jim Smith  
Secretary of State

November 15, 2002

DAVID H. NEEL  
ELITE HOMECARE, INC.  
P.O. BOX 303  
IVY, VA 22945

SUBJECT: ELITE HOMECARE, INC.  
Ref. Number: W02000032711

We have received your document for ELITE HOMECARE, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$70.00.

Please return your document, along with a copy of this letter, within 60 days your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing  
Corporate Specialist

Letter Number: 002A00060055

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. ELite Homecare, Inc.  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Virginia 3. 54-2042318  
(State or country under the law of which it is incorporated) (FBI number, if applicable)
4. August 2001 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. November 1<sup>st</sup> 2002  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 4410 Ivy Commons, Charlottesville, VA 22903  
(Principal office address)  
P.O. Box 303 Ivy, VA 22945  
(Current mailing address)
8. Purpose of Sale & Rental of Healthcare products & Services  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  
Name: Darryle Boyd  
Office Address: 3599 University Blvd Suite 903  
Jacksonville, Florida 32216  
(City) (Zip code)

## 10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Darryle Boyd  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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TALLAHASSEE, FLORIDA

## 12. Names and business addresses of officers and/or directors:

## A. DIRECTORS

Chairman: David H. NeelAddress: P.O. Box 303Fvy, VA 22945

Vice Chairman: \_\_\_\_\_

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

Director: \_\_\_\_\_

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

Director: \_\_\_\_\_

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

## B. OFFICERS

President: "Same as above"

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

Vice President: \_\_\_\_\_

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

Secretary: "Same as above"

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

Treasurer: "Same as above"

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

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. David H. Neel

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. David H. Neel / Chairman / President

(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

# Commonwealth of Virginia



## State Corporation Commission

*I Certify the Following from the Records of the Commission:*

Elite Homecare, Inc. is a corporation existing under and by virtue of the laws of Virginia, and is in good standing.

The date of incorporation is August 24, 2001.

Nothing more is hereby certified.

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TALLAHASSEE, FLORIDA



*Signed and Sealed at Richmond on this Date:  
November 5, 2002*

*Joel H. Peck*

Joel H. Peck, Clerk of the Commission