

STATE OF ALABAMA

**DOMESTIC BUSINESS CORPORATION
CERTIFICATE OF FORMATION**


20170113000018040 1/4 \$159.00
Shelby Cnty Judge of Probate, AL
01/13/2017 10:43:55 AM FILED/CERT

PURPOSE: In order to form a Business Corporation (formerly known as For-Profit Corporation) under Section 10A-1-3.05 and 10A-2-2.02 of the Code of Alabama 1975 this Certificate Of Formation and the appropriate filing fees must be filed with the Office of the Judge of Probate in the county where the corporation's initial registered office is located. **The information required in this form is required by Title 10A.**

INSTRUCTIONS: Submit one (1) signed original and two (2) copies of this completed form and the appropriate filing fees to the Office of the Judge of Probate in the county where the corporation's registered office is/will be located. Contact the Judge of Probate's Office to determine the county filing fees. **Make a separate check or money order payable to the Secretary of State for the state filing fee of \$100.00** and the Judge of Probate's Office will transmit the fee along with a certified copy of the Certificate to the Office of the Secretary of State within 10 days after the Certificate is issued. Once the Secretary of State's Office has indexed the filing the information will appear at www.sos.alabama.gov under the Government Records tab and the Business Entity Records link – you may search by entity name. Your notification of filing was provided by the Probate Judge's Office via a stamped copy and the Secretary of State's Office does not send out a copy. You may pay the Secretary of State fees by credit card if the county you are filing in will accept that method of payment (see attached). Your corporation will not be indexed if the credit card does not authorize and will be removed from the index if the check is dishonored.

(For County Probate Office Use Only)

This form must be typed or laser printed.

1. The name of the corporation (must contain the word "corporation" or "incorporated," or the abbreviation of one of those words, and comply with Code of Alabama Title 10A-1-5.04):

Geriatric Care Solutions, LLC

2. A copy of the Name Reservation certificate from the Office of the Secretary of State must be attached.

(For SOS Office Use Only)

This form was prepared by: (type name and full address)

Scozzaro Law, LLC
P.O. Box 548
Helena, AL 35080

DOMESTIC BUSINESS CORPORATION CERTIFICATE OF FORMATION

3. Street (**No PO Boxes**) address of principal office of the corporation: _____

636 Cambridge Road, Hueytown, AL 35023

Mailing address of principal office (if different from street address): _____

same



20170113000018040 2/4 \$159.00
Shelby Cnty Judge of Probate, AL
01/13/2017 10:43:55 AM FILED/CERT

4. The name of the Registered Agent: Harry Emmanuel Scozzaro, Jr.

Street (**No PO Boxes**) address of Registered Agent: 3965 Helena Road, Helena, AL 35080

Mailing address of Registered Agent (if different from street address): 3965 Helena Road, Helena, AL 35080

5. Purpose for which corporation is formed: Provide comprehensive care coordination for individuals needing

assistance and care.; the
purpose includes the transaction of any lawful business for which corporations may be incorporated in
Alabama under Title 10A, Chapter 2 of the Code of Alabama.

6. Number of Shares the corporation is authorized to issue: _____ Par Value _____
(Par value is optional information and does not have to be completed.)

7. Period of duration shall be perpetual unless stated otherwise by an attached exhibit.

8. The name(s) of the Incorporator(s): Amy E. Roberson

Street (**No PO Boxes**) address of Incorporator(s): 636 Cambridge Road, Hueytown, AL 35023

_____ Mailing address of Incorporator(s) – (if
different from street address): _____

Attach a listing if more Incorporators need to be added.

9. Director's Name: Amy E. Roberson

Street (**No PO Boxes**) address of Director: 636 Cambridge Road, Hueytown, AL 35023

_____ Mailing address of Director(s) - (if different
from street address): _____

DOMESTIC BUSINESS CORPORATION CERTIFICATE OF FORMATION



20170113000018040 3/4 \$159.00
Shelby Cnty Judge of Probate, AL
01/13/2017 10:43:55 AM FILED/CERT

Director's Name: _____

Street (**No PO Boxes**) address of Director: _____

_____ Mailing address of Director(s) - (if different
from street address): _____

Director's Name: _____

Street (**No PO Boxes**) address of Director: _____

_____ Mailing address of Director(s) - (if different
from street address): _____

Attach listing if more Directors need to be added.

10. A director has no liability to the corporation or its shareholders for money damages for any action taken, or any failure to take any action, as a director, except liability for (A) the amount of financial benefit received by a director to which he or she is not entitled; (B) an intentional infliction of harm on the corporation or the shareholders; (C) a violation of Section 10A-2-8.33; (D) an intentional violation of criminal law; or (E) a breach of the director's duty of loyalty to the corporation or its shareholders.

☐ Attached are any other provisions that are not inconsistent with law relating to organization, ownership, governance, business, or affairs of the corporation.

01/13/2017
Date (MM/DD/YYYY)

Amy E Roberson
Signature as required by 10A-2-1.20

Amy E. Roberson
Typed Name of Above Signature

Officer/Director/President
Typed Title/Capacity to Sign under 10A-2-1.20

John H. Merrill
Secretary of State

20170113000018040 4/4 \$159.00
Shelby Cnty Judge of Probate, AL
01/13/2017 10:43:55 AM FILED/CERT

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

**I, John H. Merrill, Secretary of State of Alabama, having custody of the
Great and Principal Seal of said State, do hereby certify that**

pursuant to the provisions of Title 10A, Chapter 1, Article 5, Code of Alabama
1975, and upon an examination of the entity records on file in this office, the
following entity name is reserved as available:

Geriatric Care Solutions, LLC

This name reservation is for the exclusive use of Amy E Roberson, 636 Cambridge
Road, Hueytown, AL 35023 for a period of one year beginning December 27,
2016 and expiring December 27, 2017



RES744310

**In Testimony Whereof, I have hereunto set my
hand and affixed the Great Seal of the State, at the
Capitol, in the city of Montgomery, on this day.**

December 27, 2016

Date

J. H. Merrill

John H. Merrill

Secretary of State