TRANSMITTAL LETTER

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

Helping A Handicap, Inc. SUBJECT: _ (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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 of

Status

\$78.75

Filing Fee & Certified Copy \$87.50

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: _	Sir Richard Mann	7000057254370 -06/07/0201041006_
	Name (Printed or typed)	*****87.50 *****87.50
	719 Date Palm Blvd.	
	Address	
	Melbourne, FL 32901	
	City, State & Zip	· · · ·
_	321-722- 6980	.n
	Daytime Telephone number	•

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

DB-6/10V

ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

Helping A Handicap, Inc.

ARTICLE II PRINCIPAL OFFICE

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

719 Date Palm Blvd. Melbourne, FL 32901

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Providing handicap materials for the handicapped.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Election of directors method is stated in the bylaws.

ARTICLE V INITIAL DIRECTORS/OFFICERS

The name(s), address(es) and title(s):

Sir Richard Mann - President 719 Date Palm Blvd. Melbourne, FL 32901

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is:

Sir Richard Mann 719 Date Palm Blvd. Melbourne, FL 32901

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Sir Richard Mann 719 Date Palm Blvd. Melbourne, FL 32901

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.

Date Signature/Registered Agent

Signature/Incorporator

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