N0200008501

(Re	equestor's Name)		
(Ad	dress)		
(Ad	dress)		
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Name)	
(Do	ocument Number)		
Certified Copies	_ Certificates of	Status	
Special Instructions to Filing Officer:			

Office Use Only



400008665394

11/04/02--01070--005 **78.75

02 NOV -4 MINING

11-5-02

TRANSMITTAL LETTER

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

SUBJECT:	A Helping Hand (PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an orig	rinal and one (1) copy of the art	icles of incorporation and	d a check for:
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED
FROM:	A Helping Hand, I	nc. (Printed or typed)	
	5374 NW 190th Stre	Address _	<u></u>
	Miami, Florida 330	55	
	(305) 623-2538	Telephone number	<u> </u>

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

Articles of Incorporation For A Helping Hand, Inc.

FILED

02 NOV -4 AM II: 10

SECNLIANT OF STATE
TALLAHASSEE, FLORIDA

ONE:

The name and address of this principal Corporation is A HELPING HAND, INC., at 5374 NW 190th Street, Miami, Florida 33055, in DADE County. The Corporation is organized pursuant to the FLORIDA Non-profit Corporation Code.

Two:

This Corporation is a non-profit public benefit Corporation and is not organized for the private gain of any person. The Corporation is organized under the Non-profit Public Benefit Corporation Law for charitable and educational purposes to aid the poor and disadvantaged individuals and families towards a life of self-sufficiency. The programs will consist of, but **shall not be limited to**: Community Enhancement, Housing Assistance, Employment, Literacy, Counseling, Substance Abuse Awareness and Prevention, Tutoring, Care for Terminally III Children, Assistance to Families and other programs to aid those in need.

THREE:

The duration of this Corporation shall be perpetual, with no stock and shall have no members.

FOUR:

The address of the registered office is 5374 NW 190th Street, Miami, Florida 33055, and the name of the Registered Agent of the Corporation shall be:

Betty Martin

FIVE: (1) This Corporation is organized and operated exclusively for Educational and Charitable purposes within the meaning of Section 501 (c) (3) of the Internal Revenue Code.

(2) Not-withstanding any other provision of these Articles, the Corporation shall not carry on any other activities not permitted to carry on (1) by a Corporation exempt from federal income tax under Section 501 (c) (3) of the Internal Revenue Code or (2) by Corporation contributions to which are deductible under Section 170 (c) (2) of the Internal Revenue Code.

SIX:

The Directors are elected in accordance with the By-laws. The name and address of the persons appointed to act as the initial Directors of this Corporation are:

<u>Addresses</u>	
5374 NW 190 th Street Miramar, Florida 33055	
4441 SW 27 th Street Hollywood, Florida 33023	
5975 Forresthill Blvd. West Palm Beach, Florida 33415	
7930 NW 10 th Court Miami, Florida 33150	

SEVEN:

The property of this Corporation is irrevocably dedicated to Charitable and Education purposes and no part of the net income or assets of the organization shall ever inure to the benefit of any director, officer or member thereof or the benefit of any private person.

EIGHT:

On the dissolution or winding up of the Corporation, its assets remaining after payment of, or provision for payment of, all debts, and liabilities of this Corporation, shall be distributed to a non-profit fund, Corporation, or Corporation, which is organized and operated exclusively for, Education and Charitable under Section 501 (c) (3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government for a public purpose. Any such assets not disposed of shall be disposed of by the Court of Common Pleas of the county in which the principal office of the organization is located, exclusive for such purposes or to such organization or organizations, as said Court shall determine which are organized and operated exclusively for such purposes.

NINE:

Executed on October 21, 2002. The name and address of the incorporator of this Corporation shall be:

Vernon Martin 5374 NW 190th Street

Miami, Florida 33055

FILED 02 NOV -4 AM 11: 1

REGISTERED AGENT/REGISTERED OFFICE TALLAHASSEE, FLORIE

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

The name of the Corporation is:

A HELPING HAND, INC.

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

Betty Martin 5374 NW 190th Street Miami, Florida 33055

The above person has been named as registered agent and to accept service of process for the stated purpose of preparation 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, completely, to the proper and complete performance of my duties, and I am familiar with and accept the directions of my position as registered agent.