

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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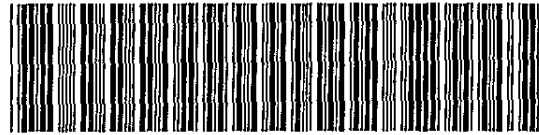
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE
FLORIDA

VP ✓
2/25/04

TRANSMITTAL LETTER

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

SUBJECT: GIVE A HELPING HAND, Inc.
(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: CRISTINA DeVane
Name (Printed or typed)

4403 BURLINGTON DR
Address

WINTER HAVEN, FL 33880
City, State & Zip

(863) 293-7444
Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

GIVE A HELPING HAND, Inc.

ARTICLE II PRINCIPAL OFFICE

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

4403 BURLINGTON DR, WINTER HAVEN, FL 33880

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO RAISE MONEY FOR CHARITABLE PURPOSES

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

AS STATED IN THE BY LAWS

ARTICLE V INITIAL DIRECTORS/OFFICERS

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

CRISTINA DEVANE - DIRECTOR - 4403 Burlington Dr - Winter Haven, FL 33880
CRISTIK DEVANE - DIRECTOR 4403 Burlington Dr - Winter Haven, FL 33880
ROBERT DEVANE - DIRECTOR 4403 Burlington Dr - Winter Haven, FL 33880

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

CRISTINA DEVANE, 4403 BURLINGTON DR, WINTER HAVEN, FL 33880

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CRISTINA DEVANE, 4403 BURLINGTON DR, Winter Haven FL 33880

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.

Crista Dev

Signature/Registered Agent

2-18-04

Date

Crista Dev

Signature/Incorporator

2-18-04

Date