

NO4000004271

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

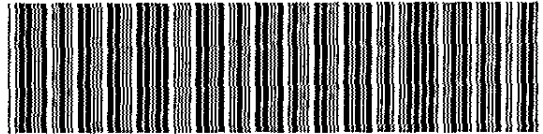
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04 APR 29 PM 4:30

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DEPT. OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: HUMAN CRISIS OUTREACH, 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 of
Status

ADDITIONAL COPY REQUIRED

FROM:

FROM: Anthony D. Zeman
Name (Printed or typed)

Name (Printed or typed)

P.O. Box 541555
Orlando, FL 32854

Address

City, State & Zip

(407) 721-5055
Daytime Telephone number

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:

HUMAN CRISIS OUTREACH, INC.

ARTICLE II PRINCIPAL OFFICE

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

P.O. BOX 541555
Orlando, FL 32854

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

All kinds of Human Crisis services, such as
Feeding the poor & needy, assisting those people
who are in disaster, helping them Spiritually, phy-
cally and materially.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Annually

ARTICLE V INITIAL DIRECTORS/OFFICERS

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

Anthony D. Zeman
2308 Sweetwater Country Club Place
Apopka, FL 32712

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ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Anthony D. Zeman
2308 Sweetwater Country Club Place
Apopka, FL 32712

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Anthony D. Zeman
P.O. Box 541555 Orlando, FL 32854

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.

Anthony D. Zeman
Signature/Registered Agent

04/29/04
Date

Anthony D. Zeman
Signature/Incorporator

04/29/04
Date