

NO 60000001399

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

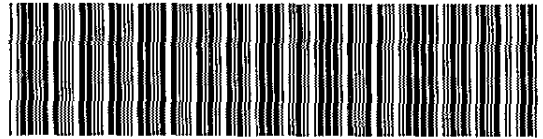
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
06 FEB 10 AM 10:46  
DIVISION OF CORPORATION

2-10-06  
wm

## COVER LETTER

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

SUBJECT: Hunter's Helping Hands 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: Marsha P. Hunter  
Name (Printed or typed)

905 General Street  
Address

Havana, FL 32333  
City, State & Zip

850-519-9159  
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:

Hunter's Helping Hands, INC.

**ARTICLE II PRINCIPAL OFFICE**

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

905 General St.  
Havana, FL 32333

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Healthcare / Disabled

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

By the Owner

**ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS**

List name(s), address(es) and specific title(s):

Marsha P. Hunter  
905 General St.  
Havana, FL 32333

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Marsha P. Hunter  
905 General Street  
Havana, FL 32333

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Marsha P. Hunter  
P.O. Box 1024  
Havana, FL 32333  
(905 General Street)

\*\*\*\*\*

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.

Marsha P. Hunter

Signature/Registered Agent

2/10/06  
Date

Marsha P. Hunter

Signature/Incorporator

2/10/06  
Date

06 FEB 10 AM 10:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED