

N06000002871

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2006 MAR 14 AM 7:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch MAR 15 2006

COVER LETTER

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

SUBJECT: GEMINI HOPE
(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



Tim and Lisa Blood
11640 Sanderling Drive
Wellington, FL 33414

FROM: Timothy A. Blood
Name (Printed or typed)

11640 Sanderling Dr.
Address

Wellington, FL 33414
City, State & Zip

561.793.0540
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 2, 2006

TIMOTHY A. BLOOD
11640 SANDERLING DRIVE
WELLINGTON, FL 33414

SUBJECT: GEMINI HOPE
Ref. Number: W06000010414

We have received your document for GEMINI HOPE and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch
Document Specialist
New Filing Section

Letter Number: 106A00014773

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

ARTICLE I NAME

The name of the corporation shall be:

Gemini Hope INC.

ARTICLE II PRINCIPAL OFFICE

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

*11640 Sanderling Dr.
Wellington, FL 33414*



Tim and Lisa Blood
11640 Sanderling Drive
Wellington, FL 33414

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Educational Purpose / ABA Home implementation

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

None, By vote.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

None

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

*Timothy A Blood 11640 Sanderling Dr.
Wellington, FL 33414*

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Timothy A Blood 11640 Sanderling Dr.
Wellington, FL 33414*

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.

Signature Registered Agent

Date

2-23-06

Signature Incorporator

Date

2-23-06