

NO6000004996

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

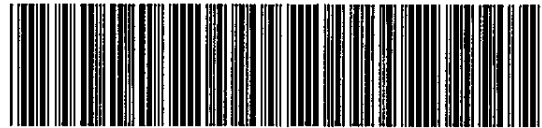
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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05/05/06--01036--014 **78.75

FILED

06 MAY -5 PM 1:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. WHITE MAY - 8 2006

COVER LETTER

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

SUBJECT: Hope CTS Corporation
(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: Carline Saint Jean
Name (Printed or typed)

541 NE 159 St
Address

Miami, FL 33162
City, State & Zip

(786) 718-7828
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)

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06 MAY -5 PM 1:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Hopc CJS Corporation

ARTICLE II PRINCIPAL OFFICE

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

541 NE 159 St
Miami, FL 33162

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to help single young

mothers who are living at home get a
trade, parenting classes and some assistance

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 AND/OR OFFICERS

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

Carline SaintJean - CEO

Stanley Tanis - President

Ronald Beliard - Treasurer

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

541 NE 159 St
Miami, FL 33162
Carline SaintJean

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

541 NE 159 St
Miami, FL 33162

Carline SaintJean

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.

Carline SaintJean
Signature/Registered Agent

5/1/06
Date

Carline SaintJean
Signature/Incorporator

5/1/06
Date