

6/27/06

COVER LETTER

FILED

06 JUN 26 AM 10:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

SUBJECT: MISSIONARY HANDS CORP.  
(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: MARIEA REGANPI  
Name (Printed or typed)

3833 EVE DR W  
Address

JACKSONVILLE, FL 32246  
City, State & Zip

904 - 641-7243.  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 1, 2006

MARIELA REGONDI  
3933 EVE DRIVE W  
JACKSONVILLE, FL 32246

SUBJECT: MISSIONARY HANDS, CORP.  
Ref. Number: W06000025175

RECEIVED

06 JUN 26 AM 10: 55

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

We have received your document for MISSIONARY HANDS, CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

☒ The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the corporation is being organized.

☒ 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) 245-6973.

Claretha Golden  
Document Specialist  
New Filing Section

Letter Number: 206A00038165

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**ARTICLE I NAME**

The name of the corporation shall be:

MISSIONARY HANDS, CORP.

**ARTICLE II PRINCIPAL OFFICE**

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

3933 EVE DR. W., JACKSONVILLE, FL, 32246

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Collect donation and distribute to orphan and poor people on America continent

**ARTICLE IV MANNER OF Election**

The manner in which the directors are elected or appointed:

Director are elected by the founders

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

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

Mariela Regondi-3933 eve dr. w. Jacksonville fl, 32246-director

Kenley Regondi—3933 eve dr. w. Jacksonville, fl, 32246—director

Sandra Ortiz --alumni way 10765, Jacksonville, fl 32246 – official.

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS THE NAME And Florida street address (P.O. Box NOT acceptable) of the registered agent is:**

.3933 eve dr. w. Jacksonville, fl, 32246 Mariela Regondi

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is: Mariela Regondi

3933 eve dr. w. Jacksonville , fl, 32246

*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

6/24/06

  
Signature/Incorporator Date

6/24/06

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