

NO9000000801

(Requestor's Name)

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(City/State/Zip/Phone #)

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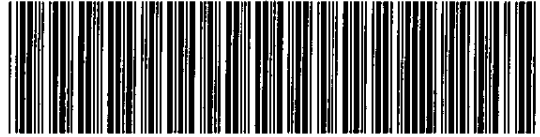
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/26/09--01033--028 **87.50

Effective Date

01/23/09

FILED
09 JAN 26 AM 11:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. McKnight JAN 27 2009

COVER LETTER

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

SUBJECT: HANDS ACROSS BORDERS, 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: RONALD ORYNICH
Name (Printed or typed)

17785 BONIELLO DRIVE
Address

BOCA RATON, FL 33496
City, State & Zip

561-632-8770
Daytime Telephone number

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

ANY QUESTIONS PLS

CALL 561-632-8770 T/24

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

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

HANDS ACROSS BORDERS, INC

Effective Date

01/23/09

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

17785 BONIELLO DRIVE
BOCA RATON, FL 33496

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

DEVELOP AND IMPLEMENT SERVICE PROGRAM TO
IMPROVE THE HEALTH AND LIVING CONDITIONS OF
UNDERSERVED POPULATIONS IN FOREIGN COUNTRIES

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed: ACCORDING TO THE BYLAWS
OF THE COMPANY THE FOLLOWING WERE APPOINTED

ROBERT ORYNICH
WILLIAM B. BARON
EDGARD JIMENEZ VARGAS

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

ROBERT W. P. ORYNICH, 920 SW 6TH ST., APT 123, GAINESVILLE, FL 32601 - DIRECTOR
WILLIAM B. BARON, 7450 SAN CLEMENTE PL., BOCA RATON, FL 33433 - DIRECTOR
EDGARD JIMENEZ VARGAS, BARRIO BERTHA DIAZ, SUBASTA 10 AL LAGO 1120 ARRIBA
MANAGUA, NICARAGUA - DIRECTOR

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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


RONALD ORYNICH, 17785 BONIELLO DRIVE, BOCA RATON, FL 33496

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Robert ORYNICH, 920 SW 6TH ST., APT 123, GAINESVILLE, FL 32601

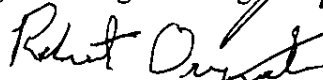
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.



Signature/Registered Agent RONALD ORYNICH

1/20/09

Date



Signature/Incorporator ROBERT W. P. ORYNICH

1/22/09

Date

~~Revised make Effective Date 1/23/09~~