

N09000009339

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

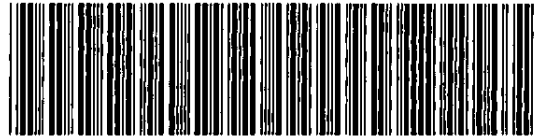
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000160839820

09/23/09--01028--014 **70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 SEP 23 PM 3:26

APPROVED
AND
FILED

VH

COVER LETTER

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

SUBJECT: ANGEL HEARTS, 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: LEONA R. ENGELHARDT
Name (Printed or typed)

2280 MARSH HARBOR AVENUE
Address

MERRITT ISLAND, FL 32952
City, State & Zip

321 - 453-6315
Daytime Telephone number

blondevents@live.com
E-mail address: (to be used for future annual report notification)

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

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

APPROVED
AND
FILED

09 SEP 23 PM 3:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:
ANGEL HEARTS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:
2280 MARSH HARBOR AVENUE
MERRITT ISLAND, FL 32952

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
TO GIVE EVERYDAY NECESSITIES TO DISADVANTAGED CHILDREN

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

THE BOARD OF DIRECTORS SHALL CONSIST OF AT LEAST THREE (3) INDIVIDUAL MEMBERS IN GOOD STANDING AND SHALL BE ELECTED TO A ONE (1) YEAR TERM AS SPECIFIED IN THE BYLAWS

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

| | | |
|--------------------------|---------------------|--------------------------------|
| P | D | D |
| LEONA R. ENGELHARDT | BROOKE TIPPENS | SARAH LEDBETTER |
| 2280 MARSH HARBOR AVE | 895 KINGS POST ROAD | 525 ISLAND COURT |
| MERRITT ISLAND, FL 32952 | ROCKLEDGE, FL 32955 | INDIAN HARBOUR BEACH, FL 32937 |

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

LEONA R. ENGELHARDT
2280 MARSH HARBOR AVE
MERRITT ISLAND, FL 32952

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LEONA R. ENGELHARDT
2280 MARSH HARBOR AVE
MERRITT ISLAND, FL 32952

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.

Leona Engelhardt
Signature/Registered Agent

9.21.09
Date

Leona Engelhardt
Signature/Incorporator

9.21.09
Date