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(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:
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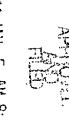
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COVER LETTER.

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

SUBJECT: Victims, Help Ts Here 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

8.75 **= \$8**7.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Sondro Speer
Name (Rinted or typed)

7121 W. Suprise Blod.

Plantotion Fl 33313

954-990-8165

Daytime Telephone number

Sandrasser 1218 com cost, net 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) 11 JAN -5 AH 8: 05 he name of the corporation shall be: Victims, Help Is Here, Ischerica STATE TALLAHASSEE FIORINA The name of the corporation shall be: ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is: 7121 W. Swarise Blud. Plantaction, Fl 33313 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Charitable scovices to all these functions in the form of mediation between victions that need all posing or favorable communication between victions that need all posing or favorable communication with other organizations. The finding help with article IV MANNER OF ELECTION The manner in which the directors are elected or appointed: II be hired as as resualt of All board of Directors will be hired as as resualt of interview + screening process concusated by independent contractors. List name(s), address(es) and specific title(s): Scondra Speer Executive Director 7121 W. Swarise Blod. Plantation, Fl 33313 ARTICLE V INITIAL <u>DIRECTORS AND/OR OFFICERS</u> ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Florida street address (r.v. Beer Blud. Swannise Blud. Plantastion, Flantastion, Fl ARTICLE VII _ INCORPORATOR The name and address of the Incorporator is: Scondress Speer Blud. 1121 W. Sush rise Blud. Plantation, Fl 33313 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/Incorporator

In this certificate, I am jamiliar with and accept the appointment as registered agent and agree to act in this capacity.

Date

Date

Date