

N110000006869

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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8/6

W110000023367

COVER LETTER

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

SUBJECT: Challenging Hands

(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: Deidra Thomas

Name (Printed or typed)

19614 nw 32nd ct

Address

Miami Gardens, FL 33056

City, State & Zip

786-859-0059

19614 NW 32nd Ct Telephone number

hawk6858comcast.net

E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
11 JUL 20 AM 10:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

May 31, 2011

DIEDRA THOMAS
19614 NW 32ND CT
MIAMI GARDENS, FL 33056

SUBJECT: CHALLENGING HANDS, INC.
Ref. Number: W11000023367

We have received your document for CHALLENGING HANDS, INC. and your check(s) totaling \$88.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

Please return 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) 245-6995.

Jessica A Fason
Regulatory Specialist II

Letter Number: 211A00010122

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

ARTICLE I NAME

CHALLENGING HANDS, INC.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
19614 NW 32ND CT.
MIAMI GARDENS, FL 33056

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO HELP EMPOWER AT RISK YOUTH THROUGH PHYSICAL FITNESS AND ATHLETICS WITH
THE ASSISTANCE OF PROFESSIONAL TRAINERS.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

BY THE PROCESS OF ELECTOR VOTES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Deidre Thomas - President & CEO
Address: 19614 N.W. 32nd Ct
Miami Gardens, FL 33056

(Name and Title: LEVAWN WEBB- SECRETARY
Address: 3460 NW 171ST STREET
MIAMI, FLORIDA 33055

Name and Title: SANDRA A. HAWKINS- VICE PRES
Address: 9568 NW 24TH AVENUE
MIAMI, FLORIDA 33147

Name and Title: DORIS THOMAS- TREASURER
Address: 19614 NW 32ND CT.
MIAMI GARDENS, FL 33056

Name and Title:
Address:

Name and Title:
Address:

ARTICLE VI REGISTERED AGENT

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

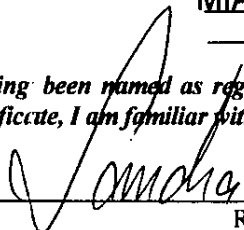
Name: SANDRA A. HAWKINS
Address: 9568 NW 24TH AVENUE
MIAMI, FL 33147

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

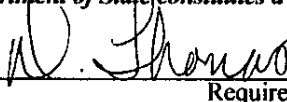
Name: DEIDRE THOMAS
Address: 19614 NW 32ND CT.
MIAMI GARDENS, FL 33056

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


Required Signature of Registered Agent

7/11/11
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.


Required Signature of Incorporator

7/11/11
Date