

N12000008539

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☐ PICK-UP

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W12-44600

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12 SEP -5 PM 4:05  
SECRETARY OF STATE  
TALLAHASSEE, FL 32399

T. Burch SEP 6 2012

## COVER LETTER

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

SUBJECT: HOPE FOR ANGELS, 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: Lisa C. Wood

Name (Printed or typed)

238 Ferney Rd.

Address

Lakeland, FL 33809

City, State & Zip

863-512-1895

Daytime Telephone number

lwood8808@gmail.com

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

August 28, 2012

LISA C. WOOD  
238 FERNEY RD  
LAKELAND, FL 33809

SUBJECT: HOPE FOR ANGELS, INC.  
Ref. Number: W12000044600

We have received your document for HOPE FOR ANGELS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

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 corrected 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) 245-6052.

Tim Burch  
Regulatory Specialist II  
New Filing Section

Letter Number: 412A00021958

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

**ARTICLE I NAME**

The name of the corporation shall be: **HELP FOR ANGELS, INC**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
238 FERNERY RD  
LAKELAND, FL 33809

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Our mission is to provide for the needs of the children of Polk County who are the innocents and are not responsible for their families' reduced circumstances. Through the distribution of clothing, shoes, toys and other needs we will strive to provide the knowledge that someone does care and there is hope for a brighter future, thus growing better adults for the community of tomorrow.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed:

Directors are elected by the manner stated in bylaws.

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

Name and Title: <u>Lisa C Wood, President</u>	Name and Title: <u>Charles A Wood, Sr., Vice President</u>
Address: <u>238 Fernery Rd</u>	Address: <u>238 Fernery Rd</u>
<u>Lakeland, FL 33809</u>	<u>Lakeland, FL 33809</u>

Name and Title: <u>Terri M. Boyette-Saxon, Secretary/Tres.</u>	Name and Title: _____
Address: <u>410 Oak Trail</u>	Address: _____
<u>Lakeland, FL 33813</u>	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

**ARTICLE VI REGISTERED AGENT**

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

Name: Lisa C Wood  
Address: 238 Fernery Rd  
Lakeland, FL 33809

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Lisa C Wood  
Address: 238 Fernery Rd  
Lakeland, FL 33809

*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*

Lisa C. Wood

Required Signature of Registered Agent

09/01/2012

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.*

Lisa C. Wood

Required Signature of Incorporator

09/01/2012

Date

FILED  
12 SEP -5 PM 4:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA