

N14000007592

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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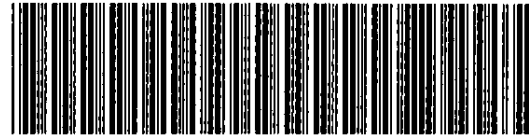
(Business Entity Name)

(Document Number)

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COVER LETTER

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

SUBJECT: Helping Hearts 4 MS Benefitting Linda Bartok Incorporated
(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: Linda & Darius Bartok
Name (Printed or typed)

998 Jardin Drive
Address

Naples Florida 34104
City, State & Zip

1-239-438-7425
Daytime Telephone number

dbartok225@embarqmail.com
E-mail address: (to be used for future annual report notification)

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

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

ARTICLE I NAME

The name of the corporation shall be: Helping Hearts 4 MS Benefitting Linda Bartok Incorporated

ARTICLE II PRINCIPAL OFFICE

Principal street address:

998 Jardin Drive

Naples Florida 34104

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To raise funds for Linda Bartok to aid in the cost of treatment and daily necessities for a better quality of living due to Multiple Sclerosis and to educate and bring awareness of the disease to the community.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: By majority vote

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Linda Bartok, Director of Operations

Address: 998 Jardin Drive
Naples Florida 34104

Name and Title: Darius Bartok, Executive Director

Address: 998 Jardin Drive
Naples Florida 34104

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

14 AUG 11 AM 11:27

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Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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: Linda Bartok

Address: 998 Jardin Drive
Naples Florida 34104

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Darius Bartok

Address: 998 Jardin Drive
Naples Florida 34104

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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

Linda Bartok

Required Signature of Registered Agent

8-6-14

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.

Darius Bartok

Required Signature of Incorporator

8/6/14

Date