

N1500000 6049

(Requestor's Name)

(Address)

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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 HANDS 4 U 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: JEFF PETERSON

Name (Printed or typed)

5015 MEDALIST RD

Address

SARASOTA, FL. 34243

City, State & Zip

941-218-0909

Daytime Telephone number

JEFF@HELPINGHANDS4U.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)

ARTICLE 1 NAME

The name of the corporation shall be: HELPING HANDS 4 U INC.

ARTICLE 2 PRINCIPAL OFFICE

5015 MEDALIST RD

SARASOTA, FL. 34243

ARTICLE 3 PURPOSE

The purpose for which the Corporation is organized is: A CHARITABLE PURPOSE FOR ANY LAWFUL CHARITABLE ACTIVITY AS DETERMINED BY THE BOARD OR DIRECTORS AND/OR IT'S AUTHORIZED REPRESENTATIVES, THAT ATTEMPTS TO IMPROVE THE QUALITY OF LIFE FOR ANYONE DISABLED, HOMELESS, DISTRESSED OR DEMONSTRATES COMPELING CAUSE FOR ASSISTANCE. OUR ENTITY OPERATES AS A 501 (C) (3) CORPORATION INTENT, UPON DISSOLUTION TO DISTRIBUTE ANY AND ALL ASSETS TO ONE OR MORE OTHER CHARITIES WITH 501 (C) (3) TAX EXEMPT STATUS.

ARTICLE 4 MANNER OF ELECTION

The manner in which the directors are elected and appointed will be by a voting process.

ARTICLE 5 INITIAL OFFICERS AND/OR DIRECTORS

NAME AND TITLE: JEFFREY D PETERSON PRES.

ADDRESS 5015 MEDALIST RD

SARASOTA, FL 34243

ARTICLE 6 REGISTERED AGENT

NAME: JEFFREY D PETERSON

ADDRESS: 5015 MEDALIST RD

SARASOTA, FL 34243

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SARASOTA, FL 34243

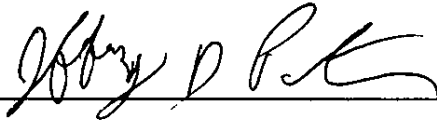
ARTICLE 7 INCORPORATOR

NAME: JEFFREY D PETERSON

ADDRESS: 5015 MEDALIST RD
SARASOTA, FL 34243

15 JUN 15 AM 8:33
SARASOTA, FL 34243

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

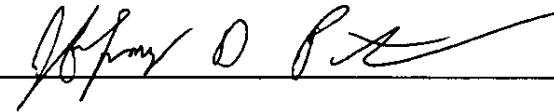


Jeffrey D Peterson

6-10-15

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.



Jeffrey D Peterson

6-10-15

Date