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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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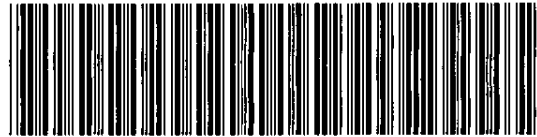
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: HEART HERITAGE, 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: WILFRED HART, II.
Name (Printed or typed)
2438 NE CENTER ST.
Address
JENSEN BEACH, FL 34957
City, State & Zip
(772) 334-0315
Daytime Telephone number
WILFRED.HART@YMAIL.COM
E-mail address: (to be used for future annual report notification)

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

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RECEIVED
MAY - 2 PM 4:11
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be: HEART HERITAGE, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

2438 NE Center Street
Jensen Beach, FL
34957

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Strengthening family heritages,
support and assist U.S. Honorable Veterans,
To give dental assistance to U.S.
Honorable Veterans.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

President + Founder
Wilfred Hart elects and appoints the director(s).

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: WILFRED HART, OFFICER Name and Title: WILFRED HART, DIRECTOR

Address: 2438 NE Center St Address: 2438 NE Center St
Jensen Beach, FL Jensen Beach, FL
34957 34957

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

FILED
16 MAY - 2 AM 8:10
CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

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:

WILFRED HART, II

Address:

2438 NE Renter St.
Jensen Beach FL 34957

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

WILFRED HART, II

Address:

2438 NE Renter St.
Jensen Beach FL 34957

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing April 17, 2016 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Wilfred Hart, II
Required Signature of Registered Agent

4/17/2016
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.

Wilfred Hart, II
Required Signature of Incorporator

4/17/2016
Date

corrected: Wilfred Hart 4/29/2016

wilfredhart@gmail.com

Thank You

