

W20000004326

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

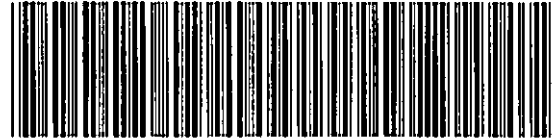
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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03/09/20--01008--021 \*\*78.75

W200000 30342

4/18/20  
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FILED  
MAR 19 2020  
FBI - MEMPHIS

20 APR -8 PM 5:00



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 23, 2020

MANUEL BARAJAS  
2378 DUNDEE CT E  
ORANGE PARK, FL 32065 US

SUBJECT: HANDUP COMMUNITY OUTREACH SERVICE INC.  
Ref. Number: W20000030342

We have received your document for HANDUP COMMUNITY OUTREACH SERVICE INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.  
<http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/>

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.

20 APR -8 PM 5:00

2020 APR -8 AM 10:33

## COVER LETTER

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

**SUBJECT:** Handup Community Outreach Service 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:** Manuel Barajas  
\_\_\_\_\_  
Name (Printed or typed)

2378 Dundee Ct E  
\_\_\_\_\_  
Address

Orange Park, FL 32065  
\_\_\_\_\_  
City, State & Zip

(480) 206-4584  
\_\_\_\_\_  
Daytime Telephone number

mbarajas.edu@gmail.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

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

20 APR -3 PM 5:00

FILE

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

ARTICLE 1     NAME

The name of the corporation shall be:

## ARTICLE II    PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

5922 Cattlemen Lane

Suite 102

Sarasota, FL 34232

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Our purpose is to help those in our community, who are in need by partnering

with local merchants, physicians, teachers, vendors and business. Our services include: employment assistance, physician placement,

emergency food programs, utility assistance, health and life insurance, phones and housing assistance.

#### ARTICLE IV MANNER OF ELECTION

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

the President or director.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Manuel Barajas (Director) Name and Title:

Address 2378 Dundee Ct. E

Orange Park, Fl 32065

Name and Title: Cesar Chacon (President) Name and Title:

Address 4029 Maverick Ave

Sarasota, Florida 34233

Name and Title: Saul Insignares (Board Member) Name and Title: \_\_\_\_\_

Address 711 Tuxford Dr.

Sarasota, Fl 34232

—

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: Christina Weston

Address: 5922 Cattlemen Lane, Suite 102

Sarasota, FL 34232

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Manuel Barajas

Address: 2378 Dundee Ct. E

Orange Park, FL 32065

20 FEB -6 PM 5:00

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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*

Christina Weston  
Required Signature of Registered Agent

February 14, 2020

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.*

Manuel Barajas  
Required Signature of Incorporator

February 14, 2020

Date