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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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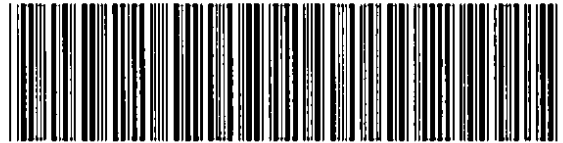
(Business Entity Name)

(Document Number)

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FILED  
JUN 10 2011  
FBI - MEMPHIS

Derrick Thompson

## COVER LETTER

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

SUBJECT: Hope for Children Today and Tomorrow, 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: Diana Paulissaint

Name (Printed or typed)

6220 S Orange Blossom Trl. Suite 516

Address

Orlando, FL 32809

City, State & Zip

239-324-2635

Daytime Telephone number

D.Paulissaint@yahoo.com

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 I    NAME**

The name of the corporation shall be: Hope for Children Today and Tomorrow, Inc.

**ARTICLE II    PRINCIPAL OFFICE**

Principal street address:  
6220 S Orange Blossom Trl. Suite 516  
Orlando, FL 32809

Mailing address, if different is:

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is: Our mission is to empower and supports  
children to break the cycle of poverty and overcome all obstacles which stand  
in their way to greatness.

**ARTICLE IV    MANNER OF ELECTION** The manner in which the directors are elected and appointed: As set  
forth in the bylaws.

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

Name and Title: Diana Paulissaint- President  
Address: 6220 S Orange Blossom Trl. Ste. 516  
Orlando, FL 32809

Name and Title: Wisrick Normil- Secretary  
Address: 6220 S Orange Blossom Trl. Ste. 516  
Orlando, FL 32809

Name and Title: Joselie Sainvil- Vice President  
Address: 6220 S Orange Blossom Trl. Ste. 516  
Orlando, FL 32809

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

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: Diana Paulissaint

Address: 6220 S Orange Blossom Trl., Ste. 516

Orlando, FL 32809

**ARTICLE VII INCORPORATOR**

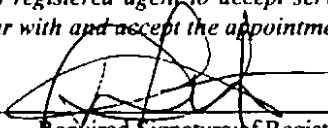
The name and address of the Incorporator is:

Name: Diana Paulissaint

Address: 6220 S Orange Blossom Trl., Ste. 516

Orlando, FL 32809

*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*

  
\_\_\_\_\_  
Required Signature of Registered Agent

6-02-20  
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.*

  
\_\_\_\_\_  
Required Signature of Incorporator

6-02-20  
Date