

NZ10000010246

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

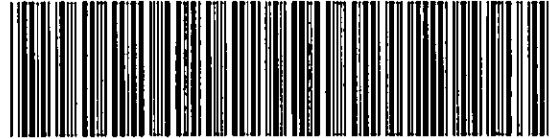
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/29/21--01010--022 **30.00

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04/29/21--01019--005 **78.75

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J DENNIS

AUG 27 2021

COVER LETTER

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

SUBJECT: Helping Hands For All Creatures Great And Small 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: Frank J. Quinones
Name (Printed or typed)

16244 Saint Augustine St
Address

Ormond, FL 32074
City, State & Zip

407-748-8379
Daytime Telephone number

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

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

LLC into
non profit

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Profit Corporation
Non-Profit

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1415, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

Helping Hands For All Creatures Great And Small LLC
Enter Name of Other Business Entity

2. The "Other Business Entity" is a LLC
(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)

on January 27, 2021
(Enter date "Other Business Entity" was first organized, formed or incorporated)

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

4. The name of the Florida Non-Profit corporation as set forth in the attached Articles of Incorporation:

Helping Hands For All Creatures Great And Small Inc.
Enter Name of Florida Profit Corporation
Non-Profit

5. If not effective on the date of filing, enter the effective date: August 2, 2021
(The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

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

Signed this 2 day of August, 2021.

Required Signature for Florida Corporation:

Signature of Chairman, President, or Chairman, Director, Officer, or, if Directors or Officers have not been selected, an

Incorporator: [Signature]
Printed Name: FRANK J. QUINONES Title: CO-FOUNDER/CEO

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: [Signature]

Printed Name: FRANK J. QUINONES Title: CO-FOUNDER/CEO

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

<u>Fees:</u>	
Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status	\$8.75 (Optional)

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

ARTICLE I NAME

The name of the corporation shall be: Helping Hands For All Creatures Great And Small Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

16244 Saint Augustine St.
Clermont, FL 34714

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

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

As stated by the bylaws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Frank J. Quinones
Co-Founder/CEO

Address: 16244 Saint Augustine St
Clermont, FL 34714

Name and Title: Alisha M. Fredrickson
Co-Founder/Program Director

Address: 16244 Saint Augustine St
Clermont, FL 34714

Name and Title: Tim Pipkorn
Financial Director

Address: 252 Wheelhouse Ln
Apt 518
Lake Mary, FL 32746

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: Registered Agents Inc.

Address: 7901 4th St N STE 300

St. Petersburg FL 33702

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Frank J. Quinones

Address: 16244 Saint Augustine St
Clermont, FL 34714

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

Bill Hume

Required Signature of Registered Agent

August 3, 2021
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.

Frank J. Quinones

Required Signature of Incorporator

August 2, 2021
Date

FROM THE DESK OF

Frank J. Quinones

August 3, 2021

Jalesa S. Dennis
Regulatory Specialist II
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe St, Ste 810
Tallahassee, FL 32303

Dear Jalesa S. Dennis,

I hope all is well.

I'm sending the attached documents back and everything should be filled out.

Is it possible to get an email letting us know when the nonprofit becomes official? We are ready to begin fundraising and are eager to move forward. We've been in this process for over 7 months and a heads up would be greatly appreciated.

I appreciate your time and effort.

Sincerely yours,

Frank J. Quinones