

N22000007948

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

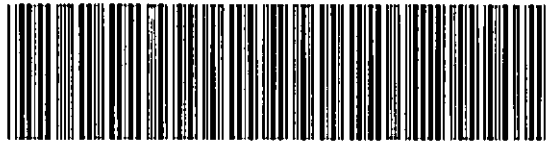
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Trinity's Helping Hands LLC Research Inc
Name of Resulting Florida Profit Corporation

The enclosed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the following eligible entity into a "Florida Profit Corporation" in accordance with ss. 607.11933 & 607.0202, F.S.

Please return all correspondence concerning this matter to:

Lawanda Hill
Contact Person

Trinity's Helping Hands LLC
Firm/Company

2879 NW 10th Ct
Address

Ft. Lauderdale FL. 33311
City, State and Zip Code

trini:love14@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lawanda Hill at (954) 200 5143
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$105.00 Filing Fees ☐ \$113.75 Filing Fees ☐ \$113.75 Filing Fees ☐ \$122.50 Filing Fees,
and Certificate of Status and Certified Copy Certified Copy, and
Certificate of Status

Mailing Address:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 23, 2022

LAWANDA HILL
2879 NW 10TH CT
FT. LAUDERDALE, FL 33311

SUBJECT: TRINITY'S HELPING HANDS OUTREACH INC.
Ref. Number: W22000023088

We have received your document for TRINITY'S HELPING HANDS OUTREACH INC. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

The Certificate of Conversion must contain the name of the Florida limited liability company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason
Regulatory Specialist II

Letter Number: 322A00004450

Thank you

Articles of Conversion
For
Converting Eligible Entity
Into
Florida Profit Corporation

The Articles of Conversion **and attached Articles of Incorporation** are submitted to convert the following **eligible business entity into a Florida Profit Corporation** in accordance with ss. 607.11933 & 607.0202, Florida Statutes.

1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:

TRINITY'S HELPING HANDS OUTREACH INC. Trinity's Helping Hands
Enter Name of the Converting Entity LLC

2. The converting entity is a limited liability company
(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 July 01, 2021
Enter date "Converting Entity" was first organized, formed or incorporated.

3. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation**:

TRINITY'S HELPING HANDS OUTREACH INC.
Enter Name of Florida Profit Corporation

4. This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its current/organic jurisdiction.

5. If not effective on the date of filing, enter the effective date: February 01, 2022
(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 _____ day of _____, 20_____.


Required Signature for Florida Profit Corporation:

Signature of Director, Officer, or, if Directors or Officers have not been selected, an Incorporator:

 _____

Printed Name: LaWanda Hill Title: Director

Required Signature(s) on behalf of Converting Florida partnerships, limited partnerships, and limited liability companies: [See below for required signature(s).]

Signature:  _____

Printed Name: LaWanda Hill Title: Director

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.

Fees:

Articles 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: TRINITY'S HELPING HANDS, OUTREACH INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

2879 NW 10TH COURT

FORT LAUDERDALE, FL 33311

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: PROVIDE ASSISTANCE TO FAMILIES IN NEED SUCH AS FOOD,
CLOTHING, SCHOOL SUPPLIES, EMERGENCY FUNDS FOR UTILITIES. INTERVENE AS A JUVENILE JUSTICE FOR
YOUTH INVOLVED WITH THE JUSTICE SYSTEM, COUNSELING FOR FAMILIES AND INDIVIDUALS; INTERACT
WITH OTHER NONPROFITS AND OTHER SOCIAL SERVICE AGENCIES TO INSURE THAT CITIZENS ARE GETTING
THEIR NEEDS MET.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: ACCORDING TO TI

As stated in the By-Laws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LAWANDA HILL, PRESIDENT

Address: 2879 NW 10TH COURT

FT. LAUDERDALE, FL 33311

Name and Title: SONYA SHERROD, SECRETARY

Address: 3473 NW 44TH STREET

LAUDERDALE LAKES, FL 33309

Name and Title: BRENDA BYNES, VICE PRESIDENT

Address: 540 NW 4TH AVENUE #2308

FORT LAUDERDALE, FL 33311

Name and Title: LAWANDA HILL, TREASURER

Address: 2879 NW 10TH COURT

FT. LAUDERDALE, FL 33311

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: LAWANDA HILL

Address: 2879 NW 10TH COURT

FORT LAUDERDALE, FL 33311

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: LAWANDA HILL

Address: 2879 NW 10TH COURT

FORT LAUDERDALE, FL 33311

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,

Lawanda Hill

Required Signature of Registered Agent

02/01/2022

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.

Lawanda Hill

Required Signature of Incorporator

02/01/2022

Date

02/01/2022 16:08:23