

N990000007491

TRANSMITTAL LETTER

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

SUBJECT: Innovative Human Services Inc.
(Proposed corporate name - must include suffix)

700003073767--3

-12/17/99--01057--001

*****78.75 *****78.75

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: Edward J. Samaro
Name (Printed or typed)

316 West Central Ave. Suite 503
Address

Winter Haven, FL 33880
City, State & Zip

(863) 294-4009
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 DEC 17 AM 10:45

FILED

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

gf 12/21

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not For Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be: Innovative Human Services Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 316 West Central Avenue, Suite 503, Winter Haven, Florida 33880.

ARTICLE III PURPOSES

The specific purposes for which the corporation is organized are: To offer human services for the purpose of strengthening the communities of Polk, Highlands, and Hardee counties (district 14) and operating under the financial support of individuals and groups, public, private, or governmental by direct donations, direct grants, or grants originating from contracts for services by conducting the following activities:

1. Counseling services, free of charge, to individuals and families taking place at the stated principal place of business or within the homes of potential clientele seeking assistance in an outreach capacity.
2. Parenting education, free of charge, to individuals and families taking place at the stated principal place of business or within the homes of potential clientele seeking assistance in an outreach capacity.
3. Mentoring services, free of charge, to individual youths referred to this organization by other public, private, or governmental human service agencies.

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

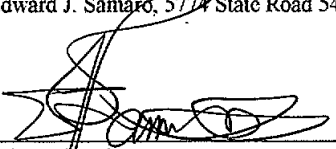
The manner in which the directors are elected or appointed is: Directors will be appointed by the Incorporator and the registered agent by joint decision to serve and satisfy the best interest of this organization and the welfare of the community this organization serves. All appointment decisions will be based solely on the performance of the potential appointee and not be based on any political affiliation or agenda whatsoever.

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:
Kimberly A. Wise, 3166 Vally High Drive, Lakeland Florida 33813

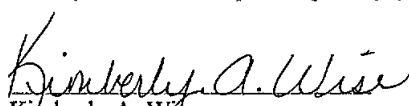
ARTICLE VI INCORPORATOR

The name and address of the incorporator to these Articles of incorporation are:
Edward J. Samaro, 5774 State Road 542 West Apartment #2, Winter Haven, Florida 33880


Edward J. Samaro,
Incorporator

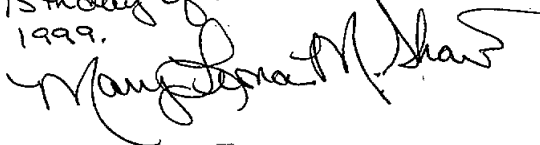
12/15/99
Date

Having been named registered agent and to accept services of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


Kimberly A. Wise,
Registered Agent

12/15/99
Date

Signed before me this
15th day of December
1999.





Mary Leona M. Shaw
MY COMMISSION # CC708800 EXPIRES
January 15, 2002
BONDED THRU TROY FAIR INSURANCE, INC.

FILED
99 DEC 17 AM 10:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA