SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

500003221385—-7 -04/24/00--01151--010 \*\*\*\*\*\*78.75 \*\*\*\*\*\*78.75

|  |                                    |   | -04/24/0007<br>*****78.75                           |
|--|------------------------------------|---|---|
| SUBJECT: Hope                          | for Wounds, I                      | nc.   |   |
| (1                                     | Proposed corpora                   | te name - must inc                            | lude suffix)  |
| Enclosed is an or<br>incorporation and |                                    |   | the articles of                                     |
| Filing Fee Fi                          | S 78.75<br>ling Fee<br>Certificate | \$ 122.50<br>Filing Fee<br>& Certificate Copy | \$131.25 Filing Fee, Certificate Copy & Certificate |
|  |                                    | ADDITIONAL COPY REQUIRED                      |   |
|  |                                    |   | -   |

FROM: Yvonne Murillo

| 7040 NW 173 <sup>rd</sup> Dr., Apt 1704 |
|---|
| Address                                 |
|   |
|   |
| Miami Lakes, Fl 33015                   |
| City, State and ZIP                     |
|   |
|   |
| (305) 698-7063                          |
|   |
| Daytime Telephone number                |

Name (Printed or typed)

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

1 4/24/00

FILED

00 APR 24 AM 10: 26

SEURETARY OF STATE TALLAHASSEE, FLORIDA

## **ARTICLES OF INCORPORATION**

O4/20/00

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I Name

The name of the entity to be incorporated shall be:

Hope for Wounds, Inc.

ARTICLE II Principal Office

The principal place of business and mailing address of this corporation shall be:

7040 NW 173<sup>rd</sup> Dr Apt. 1704 Miami Lakes, FL 33015

ARTICLE III Shares

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 Shares at \$ 5.00 each \_ \_ \_

ARTICLE IV Initial Registered Agent and Street Address
The name and Florida street address of the initial
registered agent are:

Yvonne Murillo 7040 NW 173<sup>rd</sup> Dr Apt 1704 Miami Lakes, Fl 33015

## FILED

## 00 APR 24 AM 10: 26

| ARTICLE V Incorpora<br>The name and address of<br>Articles of Incorporation   | the incorporator(s) of  | SECRETARY OF STATE LALLAHASSEE, FLORIDA |
|---|---|---|
| Yvonne Murillo<br>7040 NW 173 <sup>rd</sup> Dr.<br>Apt. 1704<br>Miami Lakes, Fl 33015   | President 50  | Shares                                  |
| Michelle M. Marshall<br>7040 NW 173 <sup>rd</sup> Dr.<br>Apt. 1704<br>Miami Lakes, Fl 33015   | Vice-President 50   | Shares                                  |
|   | e Date<br>Carting business shall be<br>oril 20th, 2000  | <b>2:</b>                               |
| Signature/Incorporator  | 04Dat   | <u>20- ZK</u>                           |
| MWastrab Signature/Incorporator-  | <b>4-2</b> Dat  | o                                       |
| Having been named as register for the above stated corporat certificate, I hereby accept agree to act in this capacity provisions of all statutes reperformance of my duties, and obligations of my position as | tion at the place designated the appointment as registered. I further agree to comply elating to the proper and com I I am familiar with and accert | in this d agent and with the            |
| Signature/Registered Agent  |   | - <b>Zo-</b> ≷ <b>K,</b> , ,            |