### 100 Requester's Name Address City/State/Zip Phone # Dins Allen - President 7267 NW 49 Court, Lauderhill Florida 33319 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time ☐ Certified Copy Mail out Will wait ☐ Photocopy Certificate of Status <u>NEW FILINGS</u> **AMENDMENTS** ☐ Profit Amendment ■ Not for Profit Resignation of R.A., Officer/Director ☐ Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other Examiner's Initials CR2E031(7/97)



FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

00 NOV 15 PM 3: 05

#### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

November 6, 2000

DINS ALLEN 7267 NW 49 COURT LAUDERHILL, FL 33319

SUBJECT: HANDS ON SERVICES, INC.

Ref. Number: W00000026548

We have received your document for HANDS ON SERVICES, INC.. However, the document has not been filed and is being returned for the following:

The registered agent and street address must be consistent wherever it appears in your document.

Please return the original and one copy of 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) 487-6973.

Claretha Golden Document Specialist

Letter Number: 600A00057444

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## ARTICLES OF INCORPORATION

**OF** 

### HANDS ON SERVICES, INC.

The undersigned, for the purpose of forming a corporation under the laws of the State of Florida, do hereby adopt the following articles of incorporation:

#### **ARTICLE ONE - NAME**

The name of the corporation is: Hands On Services, Inc.

### **ARTICLE TWO - CORPORATE DURATION**

The duration of the corporation is perpetual.

#### **ARTICLE THREE - PURPOSES**

The general purposes for which the corporation is organized are:

- 1. To engage in the services of carpentry, and the installation and repair of appliances throughout the State of Florida.
- 2. To engage in any other trade or business which can, in the opinion of the board of directors of the corporation, be advantageously carried on in connection with or auxiliary to the foregoing business.
- 3. To do such other things as are incidental to the foregoing or necessary or desirable in order to accomplish the foregoing.

#### ARTICLE FOUR - CAPITALIZATION

The aggregate number of shares which the corporation is authorized to issue is 2000 shares. Such shares shall be of a single class, and shall have a par value of One Dollar (\$1.00) per share.

#### ARTICLE FIVE - REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the corporation is 6621 NW 24 Court, Sunrise, Florida 33319 and the name of its initial registered agent at such address is Dins Allen.

### **ARTICLE SIX - DIRECTORS**

The number of directors constituting the initial board of directors of the corporation is three (3). The name and address of each person who is to serve as a member of the initial board of directors is:

**Dins Allen - President** 6621 NW 24 Court Sunrise, Florida 33313

Anthony Ferguson - Vice President 7267 NW 49 Court Lauderhill, Florida 33319

Priscilla Ferguson - Sect./Treasurer 7267 NW 49 Court Lauderhill, Florida 33319

### **ARTICLE SEVEN - INCORPORATORS**

The name and address of incorporator is:

Dins Allen - President 6621 NW 24 Court Sunrise, Florida 33313 (954) 741-1742

### ARTICLE EIGHT - SPECIAL PROVISIONS

The stock of this corporation is intended to qualify under the requirements of Section 1244 of the Internal Revenue Code and the regulations issued thereunder. Such actions as may be necessary shall be deemed to have been taken by the appropriate officers to accomplish this compliance.

### ARTICLE NINE - LIMITATION OF LIABILITY

Each director, stockholder and officer, in consideration for his services, shall, in the absence of fraud, be indemnified, whether then in office or not, for the reasonable cost and expenses incurred by him in connection with the defense of, or for advice concerning any claim asserted or proceeding brought against him by reason of his being or having been a director, stockholder or officer of the corporation or of any subsidiary of the corporation, whether or not wholly owned, to the maximum extent permitted by law. The foregoing right of indemnification shall be inclusive of any other rights to which any director, stockholder or officer may be entitled as a matter of law.

Executed by the undersigned on this 3/ day of October, 2000,

Incorporator: Dins Allen

#### **STATE OF FLORIDA**

COUNTY OF BROWARD)

BEFORE ME, the undersigned authority, on this 31 day of 0 to me well known to be the person described in and who signed the Foregoing, and acknowledged to me that he executed the same freely and voluntarily for the uses and purposes therein expressed.

WITNESS my hand and official seal the date aforesaid.

Judy P. Jackson (SEAL)

Commission # GC 828214

Expires Apr. 19, 2003

Bonded Thru
Atlantic Bonding Co., Inc.

NOTARY PUBLIC
State of Florida

My Commission Expires \_\_\_\_\_\_3

# DESIGNATION OF AND ACCEPTANCE BY REGISTERED AGENT

The following is submitted in compliance with the law of the State of Florida. HANDS ON SERVICES, INC., is a corporation organizing under the laws of the State of Florida, with its principal office located at 6621 NW 24 Court, Sunrise Florida 33313, has named Dins Allen of 6621 NW 24 Court, Sunrise Florida 33313, as its agent to accept service of process within this State.

#### ACCEPTANCE

I agree as Registered Agent to accept Service of Process; to keep the office opened during prescribed hours; to post my name (and any other officers of said corporation authorized to accept service of process at the above designated address in some conspicuous place in the office as required by law.

Registered Agent: Dins Allen

SECRETARY OF STATE

STATE OF FLORIDA COUNTY OF BROWARD

BEFORE ME, the undersign authority, this day personally appeared who, after being duly sworn, deposes and says that the facts and matters contained above are true and correct, and that he has executed the same for the purposes expressed herein.

WITNESS my hand and official seal the date aforesaid.

(SEAL)

Judy P. Jaskson

Commission # GC 823214

Repires Apr. 19, 2003

Boaded Thru

Atlantic Bonding Co., Inc.

NOTARY PUBLIC
State of Florida
My Commission Expires: 4/14/03