

# PO 2000038856

## TRANSMITTAL LETTER

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

SUBJECT: Humad Development Services, INC.  
(Proposed corporate name - must include suffix)

8000005188848  
-04/03/02--01033--015  
\*\*\*\*\*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

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM: LEE A. Stradtner  
Name (Printed or typed)

10150 Belle River Blvd N #901  
Address

Jacksonville Florida 32256  
City, State & Zip

904-997-6534  
Daytime Telephone number

FILED  
02 APR -3 PM 12:01  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

04-10-02  
NOTE: Please provide the original and one copy of the articles.

## ARTICLES OF INCORPORATION

1. The name of the corporation shall be: Human Development Services, INC.
2. The principal place of business and mailing address of the corporation is: 10150 Belle Rue Blvd Jacksonville FL 32256
3. The corporation shall have the authority to issue 1000 shares of stock.
4. The registered agent of the corporation is Rev. Lionel S. Taylor, M.A. and the registered street address is 3952 ATLANTIC BLVD. JACKSONVILLE,  
Florida 32207.
5. The initial Board of Directors shall have 2 member(s) whose name(s) and address(es) is/are as follows:  
LEE A. Stradtmer 10150 Belle Rue Blvd Jacksonville FL 32256

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

6. The incorporator of this corporation is Lee A. Stradtmer whose street address is 10150 Belle Rue Blvd Jacksonville Florida 32256

Dated 02-20-02

Lee A. Stradtmer  
Incorporator

Having been named as registered agent and to accept service 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 am familiar with and accept the obligations of my position as registered agent.

Dated 02-20-02

Lionel S. Taylor  
Registered Agent

FILED  
02 APR -3 PM 12:00  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA