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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

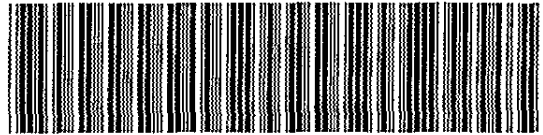
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Help at the Helm, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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 of
Status

ADDITIONAL COPY REQUIRED

FROM: Esther M. Deas
Name (Printed or typed)

P. O. Box 531273
Address

St. Petersburg, FL 33747
City, State & Zip

(352) 207-1130
Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Help at the Helm, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 531273
St. Petersburg, Fl. 33747

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide administrative support services, training and
other services as permitted by law.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

~~Est~~

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Esther M. Deas
2801 Miriam Street South
Gulfport, Fl. 33711

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Esther M. Deas (Mailing address)
P.O. Box 531273
St. Petersburg, Fl. 33747

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

Esther M. Deas

Signature/Registered Agent

JAN. 1, 2003

Date

Esther M. Deas

Signature/Incorporator

JAN. 1, 2003

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA