

P030000041043

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

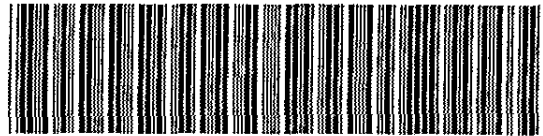
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status ☒

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FILED
03 APR - 7 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W03-10286

4-11-03
[Signature]

TRANSMITTAL LETTER

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

SUBJECT:

ANGEL'S LINK INC.
(Proposed corporate name - must include suffix)

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:

Gloria J Henderson
Name (Printed or typed)

12650 N.W. Hwy 19, Suite #9
Address

Chiefland FL 32626
City, State & Zip

352-490-9299
Daytime Telephone number

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

ARTICLES OF INCORPORATION

FILED

03 APR -7 PM 2:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be:

ANGEL'S LINK INC.

ARTICLE II PRINCIPAL OFFICE

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

LEVY OFFICE Complex
12650 N.W. Hwy 19, Suite #9
Chiefland, FL 32626

ARTICLE III SHARES

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

1

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GLORIA J. HENDERSON
LEVY OFFICE Complex
12650 N.W. Hwy 19, Suite #9
Chiefland, FL 32626

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

GLORIA J. HENDERSON
LEVY OFFICE Complex
12650 N.W. Hwy 19, Suite #9
Chiefland, FL 32626

FELISHA A. DAVIS
LEVY OFFICE Complex
12650 N.W. Hwy 19, Suite #9
Chiefland, FL 32626

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

30 day of MARCH, 20~~19~~03.

(An additional article must be added if an effective date is requested.)

Gloria J. Henderson
Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

FILED

03 APR -7 PM 2: 30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is ANGEL'S LINK INC.

2. The name and address of the registered agent and office is:

GLORIA J. HENDERSON
(NAME)
LEVY OFFICE Complex
12650 N.W. Hwy 19, Suite #9
(P. O. Box or Mail Drop Box NOT ACCEPTABLE)
Chiefland, FL 32626
(CITY/STATE/ZIP)

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 I am familiar with and accept the obligations of my position as registered agent.

Gloria J. Henderson
(SIGNATURE)

3-30-03
(DATE)