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SECRETARY OF STATE TALLAHASSEE, FLORIDA

57.57

TRANSMITTAL LETTER

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

SUBJECT: Hear Better Hear's Aid Service Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
	(PROPOSED CORPORA'	TE NAME – <u>MUST INCL</u>	JDE SUFFIX)		
Enclosed are an orig	ginal and one (1) copy of the arti-	cles of incorporation and	l a check for:		
\	, (-); · · · ·				
Д \$70.00	□ \$78.75	□ \$78.75	\$87.50		
Filing Fee	Filing Fee	4 -	Filing Fee,		
	& Certificate of Status	& Certified Copy			
			& Certificate of Status		
		ADDITIONAL CO	ŧ		
FROM: Douglas FAUIKner Name (Printed or typed)					
Name (Printed or typed)					
and the state of t					
17510 TALLY HO CT.					
Audivos					
Onesc A El 33556					
ODESS A, FL 3355L City, State & Zip					
813 - 8-75-6687 Daytime Telephone number					
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:

Hear Better Hearing Aid Service, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

14249 N. 7th St. DADE CITY, FL 33525

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Hearing And Smes & SERVILLE

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):

Douglas FAUIKAM 17510 TALLY HO CF. ODESSA, FL 33556.

ARTICLE VI REGISTERED AGENT

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

Dougles FAUTHME 17510 TALLY ItO CT. ODESSA, PL 33551

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Douglas FAUIKAL 17510 TALLY HO CT. ODESSA, FL 33556

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

Signature/Registered Agent

6-10-03 Date

6-10-03 Date

Signature/Incorporator