

PO3000093771

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

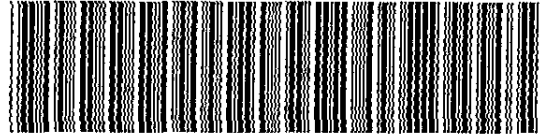
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900022457039

08/22/03--01060--005 **87.50

FILED
03 AUG 22 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

QB 8/27

TRANSMITTAL LETTER

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

SUBJECT: Seeds of Hope, 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: TERRI HOUGH
Name (Printed or typed)

1180 SPRING CENTRE SOUTH BLVD. #320
Address

ATHLONTE SPRINGS, FL 32714
City, State & Zip

407-974-2284
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)

FILED
03 AUG 22 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Seeds of Hope, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

**1180 spring Centre South Blvd. Suite 320
Altamonte Springs, FL 32714**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional Corporation - specifically, a Residential Group Home Facility

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

**Corey Manuel - Treasurer Cordett McCall - Vice-President
Terri Hough - President Shelly Babington - Secretary**

ARTICLE VI REGISTERED AGENT

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

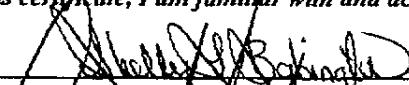
Shelly Babington 532 Sun Valley Village - 2 Altamonte Springs, FL 32714

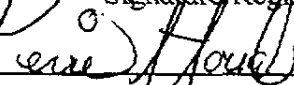
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Terri Hough 1521 S. Boundary St. Deland, FL 32720

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


Signature/Incorporator

8/20/03
Date

8/20/03
Date