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(Requestor's Name)

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(City/State/Zip/Phone #)

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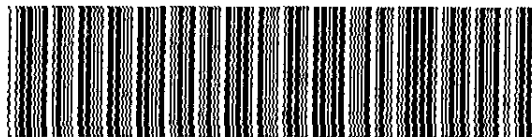
(Business Entity Name)

(Document Number)

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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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: TERRI HOUGH
Name (Printed or typed)

1180 SPRING CENTRE SOUTH BLVD. #320
Address

Altamonte Springs, FL 32714
City, State & Zip

407-774-2284
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)

ARTICLE I NAME

The name of the corporation shall be:

Seeds of Hope, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling 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

8/20/03

Date



Signature/Incorporator

8/20/03

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA