

P 03000101870

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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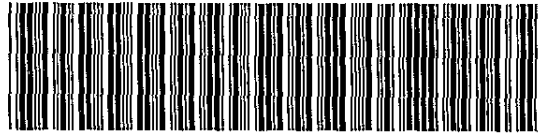
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
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11-24427

TRANSMITTAL LETTER

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

SUBJECT: New Beginnings Support Services, 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: Katrina L. Hayes
Name (Printed or typed)

7628 JANA LANE SOUTH
Address

Jacksonville Florida 32210
City, State & Zip

(904) 317-8025
777-0589
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:

NEW Beginnings Support Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7628 JANA LANE SOUTH
JAX, FL 32210

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To establish a business to serve clients & developmental disabilities.

ARTICLE IV SHARES

The number of shares of stock is: One

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Katrina L. Hayes
7628 JANA LANE South = President
JAX FL 32210

ARTICLE VI REGISTERED AGENT

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

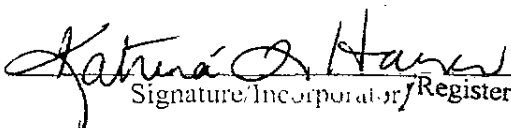
Katrina L. Hayes
7628 JANA LANE SOUTH
JAX FL 32210

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Katrina L. Hayes
7628 JANA LANE SOUTH
JAX FL 32210

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/Incorporator/Registered Agent

7/19/03
Date

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 SEP 10 AM 10:39