

P04000019585

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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(Business Entity Name)

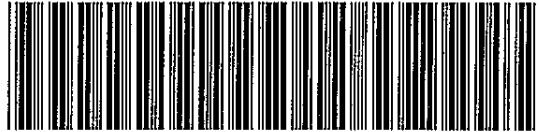
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04 JAN 21 AM 11:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

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

SUBJECT: HMP 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      ☐ \$78.75  
Filing Fee      Filing Fee  
& Certificate of Status

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

ADDITIONAL COPY REQUIRED

FROM: HELENA M. PRESSLEY  
Name (Printed or typed)

2565 NW 207 STREET UNIT #122  
Address

MIAMI GARDENS, FLORIDA 33056  
City, State & Zip

954-914-5719  
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**

04 JAN 21 AM 11:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

**The name of the corporation shall be:**

**HMP Services, Inc.**

**ARTICLE II PRINCIPAL OFFICE**

**The principal place of business/mailing address is:**

**Principal: 2565 NW 207 STREET UNIT #122  
MIAMI GARDENS, FL 33056**

**Mailing: PO BOX 540845  
OPA-LOCKA, FL 33054-0845**

**ARTICLE III PURPOSE**

**The purpose for which the corporation is organized is:**

The purpose of this corporation is to engage in designing and customizing business forms, primarily for individuals and small to medium size businesses. For the most the business is a full service business, providing administrative services and support as well as notary services. The business will also aid their customers in planning events such as conferences, workshops, receptions, and banquets.....***and any other event that needs to be planned.*** HMP Services, Inc. will offer to "solemnize the rites of matrimony." according to §117.045, Florida Statutes.

The foregoing purposes and activities will be interpreted as examples only and not as limitations, and nothing therein shall be deemed as prohibiting the corporation from extending its activities to any related or otherwise permissible lawful business purpose which may become necessary, profitable for the furtherance of the corporate objectives expressed above.

**ARTICLE IV SHARES**

**The number of shares of stock is:**

**50,000.00 Shares**

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Helena M. Pressley, President  
2565 NW 207 STREET UNIT #122, MIAMI GARDENS, FL 33056

**ARTICLE VI REGISTERED AGENT**

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

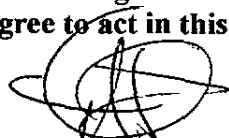
Helena M. Pressley  
2565 NW 207 STREET UNIT #122, MIAMI GARDENS, FL 33056

**ARTICLE VII INCORPORATOR**


The name and address of the Incorporator is:

Helena M. Pressley  
2565 NW 207 STREET UNIT #122, MIAMI GARDENS, FL 33056

\*\*\*\*\*  
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

01-19-04  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

01-19-04  
\_\_\_\_\_  
Date